



Aalborg Universitet

**AALBORG UNIVERSITY**  
DENMARK

## **Client perspectives on the music experience in music-centered guided imagery and music (GIM)**

Summer, Lisa

*Publication date:*  
2009

*Document Version*  
Early version, also known as pre-print

[Link to publication from Aalborg University](#)

*Citation for published version (APA):*  
Summer, L. (2009). *Client perspectives on the music experience in music-centered guided imagery and music (GIM)*. InDiMedia, Department of Communication, Aalborg University.

### **General rights**

Copyright and moral rights for the publications made accessible in the public portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.

- Users may download and print one copy of any publication from the public portal for the purpose of private study or research.
- You may not further distribute the material or use it for any profit-making activity or commercial gain
- You may freely distribute the URL identifying the publication in the public portal -

### **Take down policy**

If you believe that this document breaches copyright please contact us at [vbn@aub.aau.dk](mailto:vbn@aub.aau.dk) providing details, and we will remove access to the work immediately and investigate your claim.

**CLIENT PERSPECTIVES  
ON THE MUSIC IN  
GUIDED IMAGERY AND MUSIC**

**Lisa Summer**

Dissertation submitted for the Degree of Doctor of Philosophy  
Dept. of Communication and Psychology  
Aalborg University, Denmark  
2009

### **Acknowledgements/Dedication**

With great appreciation for support and challenges, I would like to thank my supervisor, Professor Lars Ole Bonde and Professor Tony Wigram, Director of the Aalborg PhD Program; University of Aalborg professors: Inge Nygaard Pedersen, Karin Schou, Niels Hannibal, Hanne Mette Ridder, and Ulla Holck; guest professors Denise Grocke, Gro Trondalen, Even Ruud, Cheryl Dileo, Brynjulf Stige, Tia DeNora, Christian Gold, Dorit Amir, and Jaacko Erlikkää; and Kenneth Bruscia, Anthony Meadows, Elaine Abbott, and Rudy Garred. I am indebted to the six participants, not only for the data in this study, but for the enthusiasm with which they helped me to investigate their music experiences. I would like to thank the Association for Music and Imagery for the research scholarship for this clinical study. Finally I am grateful to my family, friends, and Helen Bonny, my mentor, for their strong support throughout the writing of this dissertation.

This dissertation is dedicated to Helen Bonny, in the hope that it will further her pioneering efforts to bring peak music experiences with classical music to the forefront of music therapy theory, clinical practice, and research.

### **Abstract**

The purpose of this qualitative research study is to better understand the client perspective of GIM. Following an examination of six of my published articles and a period of self-inquiry to identify my pre-existing assumptions about music in GIM sessions, I solicited six well functioning adults capable of rich verbal description. Each participant received one music-centered GIM session adhering to the traditional protocols from the Bonny Method of GIM with the exception of two modifications: 1) repeated music – instead of a music program comprised of different pieces, the music program included repeated hearings of the same piece; and 2) music-centered guiding – instead of verbal interventions that focus primarily on imagery, the interventions focused primarily on the music. After the GIM session, each participant was interviewed using a semi-structured interview guide. The data consisted of the audiotapes and transcripts of the six GIM sessions and six interviews. A multilayered, hermeneutic analysis of the data was conducted to answer the following research questions about music-centered GIM:

1. How do participants *experience* the music?
2. How do participants *understand* the music?
3. How do *I understand* the music?

The first analysis of the individual sessions and interviews yielded narrative descriptions of the “music transference” and the “music episodes” that had occurred for each participant. Looking across the six case studies in the second analysis I discovered thirteen recurrent themes that represent the synthesized client perspective. The third analysis revealed an additional perspective about the music experience in regard therapist interventions: when repeated music and music-centered guiding are used, the intention of the therapist is to establish the music as the primary therapeutic agent of the GIM session. The three part analyses culminated in an illumination of the two simultaneous, interdependent, relational processes occurring during the music in GIM – the music relation and the self relation. When the client’s relation towards the music deepened, there was a concomitant transformation in the self relation through a projection-reintrojection cycle resulting in a reconstructive, transformation of consciousness. All findings from the layered analyses have applications to GIM clinical practice and training.



**CLIENT PERSPECTIVES ON THE MUSIC  
IN GUIDED IMAGERY AND MUSIC (GIM)  
TABLE OF CONTENTS**

Acknowledgements

Abstract

TABLE OF CONTENTS .....	i
List of Tables .....	v
List of Figures.....	vii
 1. SIX PRE-EDITED PUBLICATIONS .....	1
Overview of the research study .....	1
1.1. Introduction to Publication 1 .....	2
Summer, L. (1992). <i>Music: The Aesthetic Elixir</i> .....	4
1.2. Transition to Publication 2 .....	17
Summer, L. (1994). <i>Considering Classical Music for Use in         Psychiatric Music Therapy</i> .....	19
1.3. Transition to Publication 3.....	
Summer, L. (1995). <i>Melding Musical and Psychological Processes:         The Musical Space</i> .....	27 29
1.4. Transition to Publication 4.....	48
Summer, L. (1998). <i>The Pure Music Transference in GIM</i> .....	49
1.5. Transition to Publication 5 .....	72
Summer, L. (2002). <i>Group Music and Imagery Therapy:         Emergent Receptive Techniques in Music Therapy Practice</i> .....	73
1.6. Transition to Publication 6 .....	83
Summer, L. (2006). <i>Case Studies in Music and Imagery</i> .....	85
1.7. Transition from publications to research study .....	109
 2. INTRODUCTION .....	111
Overview of chapter .....	111
2.1. Development of music-centered GIM .....	111
2.2. Definitions .....	113
2.3. Research questions .....	118
 3. LITERATURE REVIEW .....	119
Overview of chapter .....	119
3.1. Music programs in BMGIM .....	119
3.2. Relationship between music and imagery .....	122
3.3. Listening perspectives .....	127
3.4. Direct experience of music in GIM .....	130
3.5. Guiding interventions .....	133
3.6. Client experiences in GIM .....	134
3.7. Summary: Need for the study .....	137

4. METHOD .....	139
Overview of chapter .....	139
4.1. Hermeneutic inquiry .....	139
4.2. Design .....	141
4.3. Self-inquiry .....	141
4.3.1. Reflexive self-inquiry .....	141
4.3.2. RepGrid inquiry.....	143
4.4. Pilot study.....	149
4.4.1 GIM session.....	149
4.4.2 Qualitative interview.....	152
4.4.3 Data analysis.....	154
4.4.4 Findings.....	155
4.5. Participants.....	156
4.6. Procedure and materials.....	158
4.7. GIM session protocol.....	159
4.7.1 Prelude.....	159
Preliminary music choice.....	159
4.7.2 Induction.....	160
4.7.3 Music program.....	160
4.7.4 Music imaging with music-centered guiding interventions.....	162
4.7.5 Return/postlude.....	162
4.8. Qualitative interview protocol.....	162
4.9. Data analysis .....	165
4.9.1 Vertical analysis.....	166
4.9.2 Horizontal analysis.....	167
5. RESULTS: VERTICAL ANALYSIS .....	169
Overview of chapter.....	169
5.1. Hillary .....	170
5.1.1 Profile .....	170
5.1.2 GIM session.....	171
5.1.3 Vertical analysis.....	174
5.2. John .....	178
5.2.1 Profile.....	178
5.2.2 GIM session.....	179
5.2.3 Vertical analysis.....	182
5.3. Nancy .....	187
5.3.1 Profile.....	187
5.3.2 GIM session.....	188
5.3.3 Vertical analysis.....	192
5.4. Deval .....	198
5.4.1 Profile.....	198
5.4.2 GIM session.....	199
5.4.3 Vertical analysis.....	203

5.5 Michelle.....	210
5.5.1 Profile.....	210
5.5.2 GIM session.....	211
5.5.3 Vertical analysis.....	215
5.6 Bill .....	219
5.6.1 Profile.....	219
5.6.2 GIM session.....	220
5.6.2.1 Vertical analysis.....	225
5.7 Conclusion.....	229
6. RESULTS: HORIZONTAL ANALYSIS .....	231
Overview of chapter.....	231
6.1. Research questions one and two.....	231
6.2. Research question three.....	235
6.2.1. Relational process with music .....	235
6.2.2. Projection-reintrojection cycle.....	239
6.2.3. Synthesis of music process and imagery cycle .....	242
7. ANALYSIS OF MODIFICATIONS.....	244
Overview of chapter.....	244
7.1 Repeated music.....	244
7.1.1 Method of analysis.....	244
7.1.2 Results .....	245
7.1.3 Conclusion.....	252
7.2 Music-centered guiding interventions.....	254
7.2.1 Method of analysis.....	254
7.2.2 Results.....	255
7.2.3 Summary of focus groups.....	264
7.3 Summary.....	266
8. DISCUSSION.....	267
Overview of chapter.....	267
8.1 Summary of the study.....	267
8.2 Findings in relation to pre-edited publications.....	268
8.2.1 (1992) <i>Music: The aesthetic elixir</i> .....	269
8.2.2 (1994) <i>Considering classical music for use in psychiatric music therapy...</i>	271
8.2.3 (1995) <i>Melding musical and psychological processes</i> .....	272
8.2.4 (1998) <i>The pure music transference in GIM</i> .....	273
8.2.5 (2002) <i>Group music and imagery therapy</i> ; (2006) <i>Case studies in music and imagery</i> .....	273



8.3 Findings in relation to previous research.....	274
8.3.1 Music experience in BMGIM.....	274
8.3.2 Relationship between music and imagery.....	278
8.3.3 Listening perspectives.....	281
8.3.4 Direct experience of music in GIM.....	282
8.3.5 Guiding interventions.....	284
8.3.6 Client experiences in GIM.....	285
8.4 Implications for GIM clinical practice.....	286
8.4.1 Music-centered GIM.....	286
8.4.2 Repeated music.....	287
8.4.3 Music-centered guiding interventions.....	290
8.5 Implications for GIM training.....	291
8.5.1 New paradigm of GIM training.....	291
8.5.2 Traditional GIM training.....	292
8.6 Limitations of the method.....	292
8.6.1 Participants .....	293
8.6.2 GIM session.....	294
8.6.3 Qualitative interview.....	295
8.6.4 Data collection and analysis.....	298
8.6.5 Hermeneutic approach.....	300
8.7 Conclusion.....	308
8.7.1 Pre- versus post-study understanding.....	308
8.7.2 Summation of findings.....	310
9. ENGLISH SUMMARY.....	312
10. DANSK RESUME.....	318
11. REFERENCES.....	325
12. APPENDICES.....	335
A. Description of music programs .....	335
B. Categorization of music programs.....	341
C. RepGrid: Elicitation .....	342
D. RepGrid: PrinCom .....	343
E. RepGrid: Display.....	344
F. RepGrid: Focus.....	345
G. Participant consent form.....	346
H. Hillary session transcript.....	347
I. John session transcript.....	350
J. Nancy session transcript.....	352
K. Deval session transcript.....	354
L. Michelle session transcript.....	357
M. Bill session transcript.....	359
N. Hillary interview transcript.....	362
O. John interview transcript.....	369
P. Nancy interview transcript.....	377
Q. Deval interview transcript.....	390
R. Michelle interview transcript.....	408
S. Bill interview transcript.....	417

## Tables

Table 4.1	Riley music program .....	150
Table 4.2	Pilot interview: Analysis of music questions .....	153
Table 4.3	Pilot interview: Analysis of general questions .....	153
Table 4.4	Participant profiles .....	157
Table 4.5	Semi-structured qualitative interview guide .....	163
Table 5.1	Participant profiles (same as Table 4.4).....	170
Table 5.2	Hillary music program .....	172
Table 5.3	Hillary guiding interventions .....	172
Table 5.4	Hillary music episodes.....	178
Table 5.5	John music program.....	180
Table 5.6	John guiding interventions.....	180
Table 5.7	John music episodes .....	186
Table 5.8	Nancy music program .....	189
Table 5.9	Nancy guiding interventions.....	189
Table 5.10	Nancy music episodes.....	197
Table 5.11	Deval music program.....	200
Table 5.12	Deval guiding interventions .....	200
Table 5.13	Deval music episodes .....	210
Table 5.14	Michelle music program .....	212
Table 5.15	Michelle guiding interventions.....	212
Table 5.16	Michelle music episodes.....	219
Table 5.17	Bill music program.....	221
Table 5.18	Bill guiding interventions.....	221
Table 5.19	Bill music program inadequacies.....	226
Table 5.20	Bill music episodes.....	228
Table 6.1	Participant perspectives: Horizontal themes.....	232
Table 6.2	Participants' music relation.....	239
Table 6.3	Nancy projection-reintrojection cycle.....	240
Table 6.4	Participants' projection-reintrojection cycle.....	242
Table 7.1	Use of repeated music.....	245
Table 7.2	Hillary music program (same as Table 5.2) .....	246
Table 7.3	John music program (same as Table 5.5) .....	247
Table 7.4	Nancy music program (same as Table 5.8) .....	248
Table 7.5	Deval music program (same as Table 5.11) .....	250
Table 7.6	Michelle music program (same as Table 5.14) .....	251
Table 7.7	Bill music program (same as Table 5.17) .....	252
Table 7.8	Guiding interventions and program length .....	256
Table 7.9	Use of music-centered versus imagery-centered guiding interventions.....	256
Table 7.10	Music- versus imagery-centered guiding interventions in music therapists and non-music therapists .....	256
Table 7.11	Mean differences between music-versus imagery-centered guiding interventions in music therapists and non-music therapists .....	257
Table 7.12	Music-centered guiding categories.....	259

Table 7.13	Use of music-centered guiding categories by participant.....	260
Table 7.14	Use of music-centered guiding categories: Music therapists versus non- music therapists.....	260
Table 7.15	Participant versus focus groups’ perspectives on the music experience .....	265
Table 8.1	BMGIM guiding categories: Summer versus Bruscia .....	284
Table 8.2	Pre- versus post-study perspectives .....	309

## Figures

Figure 4.1	RepGrid princom mapping .....	146
Figure 4.2	Layers of data analysis .....	165
Figure 5.1	Hillary mandala .....	174
Figure 5.2	John mandala .....	182
Figure 5.3	Nancy mandala.....	191
Figure 5.4	Deval mandala.....	202
Figure 5.5	Michelle mandala.....	214
Figure 5.6	Bill mandala #1 .....	223
Figure 5.7	Bill drawing #2.....	223
Figure 5.8	Bill drawing #3.....	223
Figure 5.9	Bill drawing #4.....	223
Figure 5.10	Bill drawing #5.....	223
Figure 5.11	Bill drawing #6.....	223
Figure 8.1	Hermeneutic spiral.....	301

## Chapter 1: Six Pre-Edited Publications

### Overview of the research study

Chapter One includes six of my early publications and a short analysis of each. The first four publications: *Music: The Aesthetic Elixir* (1992 article), *Considering Classical Music for Use in Psychiatric Music Therapy* (1994 article), *Melding Musical and Psychological Processes: The Musical Space* (1995 article), and *The Pure Music Transference in Guided Imagery and Music* (1998 book chapter) are theoretical articles that center upon psychodynamic, music-centered, and humanistic/transpersonal explanations of the music experience in GIM. The last two publications: *Group Music and Imagery Therapy: Emergent Receptive Techniques in Music Therapy Practice* (2002 book chapter) and *Case Studies in Music & Imagery* (2006 book chapter) explain how I had to modify the GIM method for my private practice and for group therapy. These two main themes: the music experience in GIM and modifications of GIM were integrated into the topic of the present study: a music-centered adaptation to GIM. The chapter concludes with the statement of purpose for the study. Chapter Two explains how this music-centered adaptation developed in my clinical practice with adults diagnosed with mood, addiction, and anxiety disorders. It presents formal definitions of Guided Imagery and Music (GIM), music-centered Guided Imagery and Music (MCGIM), and the Bonny Method of Guided Imagery and Music (BMGIM). It concludes by articulating the purpose of the study and its three research questions. Chapter Three is the literature review in which the main topics of the study are explored and the need for the study is explained. The design of the study and an argument for the use of the hermeneutic spiral as a research strategy begins Chapter Four. Then the initial study activities are described: the self-inquiry and the pilot study. Subsequently, the participants, procedures, and materials are delineated. Finally, the method for the GIM session, the qualitative interview, and the data analysis are presented. Chapter Five introduces each of the six participants and reports the results of the vertical data analysis for each. The first part of Chapter Six addresses the first two research questions: *How did the participants experience the music portion of the music-centered GIM session?* and *How did participants understand their music experience?* It answers the research questions with thirteen themes which were the

outcome of the horizontal analysis. The second part of Chapter Six answers the third research question: *How do I understand the music experience in music-centered GIM?* A two part answer is articulated, then synthesized into a final statement. Chapter Seven answers a question that emerged during the data analysis: *How does music-centered GIM differ from BMGIM as a method?* First a descriptive report presents the results of an investigation into the modifications that constitute music-centered GIM: repeated music and music-centered guiding interventions. Quantitative and qualitative evidence illustrates their prevalence in each participant's session and additional qualitative evidence about music-centered guiding from two impromptu focus groups of GIM trainees and GIM Fellows is included. Separate conclusions are drawn in regard each technique and a final conclusion is offered. Chapter Eight begins with a summary of the research study. The findings of the study are then related to my prior publications (Chapter One), to previous research (Chapter Three), to clinical practice, and clinical training. Limitations of the hermeneutic method and the study's protocols are given attention and finally, a conclusion is offered. Although a formal analysis of the music used in the six GIM sessions is beyond the scope of this study, there are nevertheless, two informational reports on the music in the appendices.

### **1.1. Introduction to Publication 1**

*Music: The Aesthetic Elixir* [published in the *Journal of the Association for Music and Imagery*, 1992,1(1), 43-54] was written in 1992 during my time as Director of GIM programs at the Bonny Foundation where I taught alongside Helen Bonny for ten years until her retirement in 1998. In addition to the overall the content of the article being reflective of the GIM teaching strategies developed at the Bonny Foundation from 1988-1998, Bonny's influence is particularly evident in the humanistic, transpersonal, and music-centered theoretical sections.

The initial section, "The Development of Music as a Language" introduces the article's initial psychodynamic concept, that the therapeutic dyad serves as a healthy re-enactment of the parent-child dyad, and subsequently demonstrates how it follows that therapy is a form of nurturance. The two essential childhood experiences within the earliest parent-child dyad are identified as the "me" and the "not-me" experiences (Winnicott, 1969). Since providing these

two experiences is the primary role of the parent in child development, it follows that providing healthy “me and not-me” experiences is also the primary role of the therapist in the therapeutic process. In music therapy it is the music that serves this primary role. The “me” state is best stimulated through a “sympathetic music structure;” music that is either familiar to, or preferred by, the client. The “not-me” state is best stimulated through music that is unfamiliar, evocative, and contains significant tension due to extended development sections. The initial section of the article concludes with a description of the GIM process from the psychodynamic point of view in which a music experience begins with a “me” experience and then moves beyond the “not-me” experience.

Beginning with the section, “The Aesthetics of Classical Music in Therapeutic Transformation,” the article describes the GIM process from the viewpoint of humanistic and transpersonal theory. Specifically, it addresses the question of how classical music is able to create a transpersonal experience by combining the concepts of altered states of consciousness and the transcendence of time.

The final sections include a music-centered viewpoint where I attempt to use purely musical references, including a discussion of Beethoven’s *Fifth Symphony*, to explain music’s power. Please note that this article depicts the concept of “merging” with music from the humanistic perspective as a healthy, therapeutic state which creates the feeling of the suspension of time as opposed to the more traditional psychoanalytic perspective which sees merging with music as a regressive state. It is humorous to note that this article uses the term “tapes” when referring to music programs for GIM. Since its publication, technology has advanced several steps beyond cassette tapes to CDs, MP3s, and internet downloading which continues to benefit GIM programs through increased access to a growing variety of recordings.

The article concludes: “Certainly, it is time for the field of music therapy to address the neglected study of the aesthetic domain” (p. 53). This call for music therapists to consider a music-centered approach to treatment is one I needed to follow with the present research study. In addition, the article’s main theme: the use of the altered state of consciousness to loosen

boundaries and become one with the music to move from a “me” to “not-me” experience figured prominently in its development.

---

SUMMER, L. (1992) MUSIC: THE AESTHETIC ELIXIR

JOURNAL OF THE ASSOCIATION FOR MUSIC AND IMAGERY, 1(1), 43-54

### **The Development of Music as a Language**

In traditional psychotherapy speech is the medium utilized for communication and expression. Recently, the use of music has also proven itself to be a powerful tool in the delivery of psychotherapy. But what is music? The soother of savage breast, the propellant of militaristic ventures, the ineffable language of the soul; music is simply the ordered placement of sonic events in time.

“Unlike the book, the piece of music is immediate common ground. Our responses to it can be simultaneously private and social. . . . We draw close while being, more compactly ourselves” (Steiner, 1971, p. 121). Steiner’s statement regarding our responses to music rings true not only on a private and social level, but also on the psychological level, in which we draw close to the younger version of ourselves (the primal, the infant).

How do we acquire the use of music as a language for expression and communication? To the younger version of ourselves, language is music. A newborn hears a symphony of diverse abstract sounds; language has not yet become representational. “The infant lacks the capacity of relating to language as a semantic system, to its symbols and concepts, he is responding to the various sound components – intensity, pitch, rhythm and timbre...If we could turn back and identify with the infant, hearing the world around us through infantile ears, might not the secrets of music unveil themselves before us, enabling us to understand its paths of expression?” (Noy, 1968, p. 334).

The infant cannot comprehend specific meaning in verbal communication, but the “inarticulate, preverbal music of mood and intent is a constant undercurrent in speech” (Burrows, 1990, p. 32). Words are nothing more than sounds arranged in patterns, and yet the infant recognizes the essential import of these patterns, and that the patterns have significance. This attachment of significance to sound patterns precedes actual comprehension. It is the repetition



of sound patterns which reinforce the pattern's particular significance. The very act of repetition serves as a link between the parent and child, a notice of ipseity.

This early mode of expression and communication between parent and child creates within us the latent ability to utilize sounds as meaningful expression. Just as the parent assists the newborn, the music therapist helps the new client to feel comfortable using the elements of music for expression and communication.

### **Music as the Medium**

The act of speaking with a therapist contains content boundaries. Verbal communication delineates, it restricts, it is primarily about the world outside. The very act of speaking to a therapist creates a separation between the communication with the therapist and communication with the psyche. The focus is upon translating self-experience to make it understandable to the therapist. The client, perforce, must create a verbal container for his immediate feelings, his life experiences. In many instances, verbalization is not sufficient to effect therapeutic change, as it is our usual mode of communication and activates the usual defensive psychological patterns.

The music therapist uses music to unlock the soul, to free it to express not only repressed memories but also to convey emotions beyond any verbal analogue. Grown men who might otherwise disdain the public display of emotions will cry during the audition of a piece of music. It is not strange that therapists have used this peculiar instrument, music, to delve into the otherwise often heavily defended psyche. Music allows the client to bypass usual verbal defenses by reactivating primal experiences of expression through the elements of sound, sound without specific representational meaning.

Bruscia (1989) defines music therapy as "a systematic process of intervention wherein the therapist helps the client to achieve health, using musical experiences and the relationships that develop through them as dynamic forces of change" (p. 47). The systematic process of musical and interpersonal interventions includes the following basic steps: 1) provide support for the client's identity, 2) expand the client's repertoire of experiences (behavior, feelings, insights, etc.), and 3) allow for awareness and integration of the experiences which are achieved through the employment of sound and music.

### **Supporting the “Me” Experience: Individual Therapy**

Winnicott (1962) has described the basic functions of providing “good-enough mothering” for a child, in order to support the child’s natural growth pattern. A successful music therapy process can be likened to the re-enactment of the successful and natural development of Winnicott’s mother-child dyadic relationship. Winnicott contends that the first requirement for a “good-enough mother” is the provision of strong and unconditional nurturance and support. The music therapist in beginning sessions should have this same express purpose in mind: the support of the client’s experience of himself through the aesthetic domain of music.

The use of spontaneously improvised music is one effective technique in the supportive therapy of beginning sessions. For example, in a spontaneously improvised music therapy session where the therapist plays the piano and the client utilizes simple rhythm and melodic percussion instruments, the client is able to be simultaneously composer, performer, and listener, expressing and communicating his inner “me” experiences to the therapist. The music therapist playing simultaneously with the client, acting as composer, performer and listener as well, but within a supportive framework rather than a self-expressive one, gives reinforcement to the client’s identity. The therapist matches the client’s tempo, rhythms, tonality, dynamics, etc. and provides a “musical background or accompaniment that reverberates the client’s feeling while also offering a musical structure for containing their release” (Bruscia, 1987, p. 552). Creating a sympathetic musical structure is a “holding” device, and allows the client to project his inner experiences of himself outward into sound. When his inner experience is reinforced by the therapist’s “holding” accompaniment, he will feel a strong sense of support for his identity, his “me” experience. This is the heart of the improvisational process, and the first manifestations of the client/therapist relationship in music. The client and therapist are making musical contact (Nordoff & Robbins, 1977).

The popular and New Age musical forms, which are structurally simple and repetitive can communicate a feeling of being “at home” to the client. Singing, playing or listening to recordings of popular music is common in music therapy sessions when the therapist is intending to create support and safety, prior to pushing beyond the familiar confines of the client’s self-

experience or the “me” experience. In fact, in hospital work with acute psychiatric patients, evocative or complex music is contraindicated. Throughout treatment the therapist provides supportive, holding music. Goldberg (1988) cites seriously ill client’s insufficient ego defenses as the reason for utilizing holding music, and characterizes the music she uses as being of short duration and limited dynamics. The element of repetitiveness in most popular and New Age music, and the repetitiveness common to supportive music improvisations carries a message of comfort and nurturance without threatening the “me” experience.

**Familiar music** is another way to create a “good-enough” nurturing environment in music therapy. Songs or pieces with which a client is familiar have acquired specific meanings and feelings for the client through association and memory. Thus, the melody first danced to by a pair of lovers becomes “our song” and inherits a meaning to the individuals involved beyond the actual intent of the composer. Suffocating Aida and Radames in the final scene of Verdi’s *Aida* meant one thing to Verdi, but it is by me indelibly associated with my first kiss from my husband to be. Pieces with fixed meanings for the client provide a supportive reflection of the self in sound, the “me” experience.

Utilizing a musical genre or a specific piece of preferred music (rather than therapist’s prescriptive choice) also allows for a supportive “me” experience for the client. Music which a client prefers is a direct reflection of a particular aspect of the psyche and brings up specific memories, feelings, and thoughts in a manner that validates the client’s present and past state of being. It will create a supportive experience and can lead to a swift encounter with many kinds of problems. Familiar and preferred music, however, will not usually encourage work within the deeper levels of the psyche due to the specific, and sometimes rigid thoughts and feelings which arise in response to it.

### **Supporting the “Me” Experience: Group Therapy**

Popular, familiar or preferred music, and supportive improvisations are especially beneficial in group music therapy as well. The immediacy of a current hit provides a common ground to support the beginning of a group identity, a collective “we” experience. Familiar music allows for comfortable group interaction to begin. Lyrics which are reflective of problems

of many group members (such as feelings of loneliness) create a bond among the group, resulting in catharsis and insight. Provocative lyrics (such as resorting to alcohol in the face of difficulty) bring problem solving, decision making, and reality testing to the fore. Work upon these goals which are common to all group therapy is most effective in a non-confrontive manner through the common and enjoyable experience of music listening and making. In like manner, a spontaneous musical composition represents a process of expression for each group member, and for the creation of a group identity through music. Supportive musical experiences highlight identity in both individual and group treatment.

### **Expanding Beyond the “Me” Experience and Its Contraindications**

Winnicott (1969) contends that it is the mother’s duty to provide the child with stimulating experiences in order to allow for natural psychological and physical growth. Providing the child with new and challenging “not-me” experiences promotes ego development through mastering anxiety. When a child encounters an unfamiliar experience, a new toy for example, this “not-me” experience may at first produce anxiety. However, with support from the parent, this anxiety can be a “call to action.” The child can be encouraged to play with this toy and to incorporate it into his repertoire of comfortable “me” experiences, and thus expand his abilities, behaviors, and feelings – expand his sense of being in the world.

Winnicott’s theory contends that a transitional space, one between reality and fantasy, is created through children’s play, and that this transitional space is a bridge to growth. In music therapy, the music itself creates a highly effective transitional musical space wherein the client can experience, and then incorporate, new and sometimes threatening “not-me” experiences. Nolan (1989) calls improvisational music the transitional object which can effectively bridge inner anxiety and outer reality.

In each session, the therapist creates a musical space for the client. At times this will be a musically supportive “me” experience. In this regard, Winnicott warns parents against presenting experiences of the “not-me” type which are either: too frequent or threatening (a toy not age appropriate), which could injure the child’s sense of mastery over external and internal objects and situations; or too infrequent, which could cause complacency and inactivity in the

child. In therapy, clients with weak or unstable egos, with severe physical illness or physical pain, and those in immediate crisis require a therapeutic approach which is especially supportive, rather than evocative. Supportive therapeutic interventions in the aesthetic domain are the heart of therapy with these clients. Evocative musical experiences should be prepared for fully and approached cautiously.

### **The “Not-Me” Experience in the Aesthetic Domain**

For clients with adequate ego strength, or for those clients in long-term music psychotherapy, the musical space can be a highly evocative one, with significant “not-me” experiences manifested in sound. For example, whereas supportive musical improvisations contain repetitive, simple, and full sound patterns, an evocative improvisation is created by developing the sounds, the musical material, created by the client. Utilizing harmonic modulations, and variations in various musical elements such as rhythm, melody, timbre, dynamics, tempo, register, and phrasing, the therapist presents new possibilities for the expansion of the client’s musical behavior, and concomitantly, his repertoire of behaviors. Kenny suggests that with music, “we symbolically experience situations other than the one in which we presently find ourselves...[and that the] client hears new ideas for solutions and experiences new feelings” (1985, p. 60).

### **The Aesthetics of Classical Music in Therapeutic Transformation**

In singing, playing or listening to already composed music, which is complex and unfamiliar, a “not-me” experience is created. In using classical music the music therapist is able to enter a new and boundless terrain. With rare exception a classical piece will have an effect beyond support and preconceived associations.

Classical music is more than another genre. It is a distillation of the attempts of the greatest abstract creative minds of Western civilization to shape time and convey meaning without the use of words or pictures. Only the most superlative works have survived the crucible of time and become part of what makes our species meaningful. The music that has survived the crucible is fit. Whereas, the music of Dittersdorf languishes, deservedly, in the dusty archives; the music of revolutionary Beethoven thrives.

The great musical works have not survived by luck. Regardless of fashion changes, political upheavals, or the philosophical implications of quantum physics, Beethoven still effects people in 1992 without need of footnote, emendation, or modernized translation. His *Fifth Symphony* is as strong now as it was when it was first performed. Stravinsky's *Rite of Spring* is as wildly exuberant at 75 years of age as it was at its conception. Does Bach's music sound dated? There is in great music a quality, a veracity, a true empathic relationship with humanity, that makes it not just immortal but timeless. We may dance to today's newest tune, but our children's children will find it (as we find our parents' parents' music) quaint, at best. Yet still will our children's children's hearts resonate with undiluted appreciation and intuitive understanding of Bartok's *Concerto for Orchestra*. Why? Great music is a reflection of our most complex and primal selves. It penetrates time, not just into our youth but into our essence and origins. Jung would characterize it as archetypal. Alfred Lorenz, writing on Wagner, commented, "...you sometimes experience moments in which your consciousness of time suddenly disappears and the entire work seems to be... 'spatial' with everything present simultaneously in the mind" (cited in Adorno, 1981, p. 33).

Lorenz may be reflecting Wagner's own text to his opera, *Parsifal*, in which Parsifal says, "I hardly move, yet far I seem to have come," to which Gurnemanz replies, "You see, my son, time changes here to space" (from Act I, "In the Grail's Domain"). Gurnemanz explains that Parsifal cannot find the grail by following the path of others; no man can find the path to the grail but that the grail itself leads him there. Thus does great classical music impel the client in music therapy to move from the conscious "me" experience towards the unconscious, a part of the self heretofore unknown or unexperienced. The therapeutic application of carefully selected pre-recorded classical music provides a significant "not-me" experience for the music therapy client.

### **Guided Imagery and Music (GIM)**

The music therapy process of GIM developed in 1971 by Helen Bonny, was specifically designed to stimulate transformative, therapeutic experiences through the use of programmed classical music (Bonny, 1975, 1977, 1978a). The exclusive use of classical music as the catalyst

for imagery is one of several factors which differentiate GIM from other music and imagery techniques (Bonny, 1978b).

In a GIM session the music therapist assesses the current emotional state of the client, and then chooses a classical music program (usually from tapes developed by Helen Bonny) which will first match that state in sound. This provides an initial supportive “me” experience in sound. Once a supportive musical space is established, the second stage of the GIM process involves music of a more evocative nature, the “not-me” experience. Whereas the initial piece of music may suggest to the client a comfortable, relaxing scene in a meadow, the second more evocative piece may impel the client away from the comfortable scene, to explore a nearby darkened forest. In this second piece of music, the structure of the music itself will continue to support the sense of comfort gained in the first scene the “me” experience, while simultaneously compelling the client’s movement into new, and possible unconscious, territory – the “not-me” experience. (This example is not meant to imply that all GIM sessions follow this same structure. For additional descriptions of GIM procedures and sessions, see Summer, 1988.)

*Gaining Access to the Personal Unconscious: the “Me” to the “Not-Me”*

The key to classical music’s ability to stimulate heretofore unconscious thoughts and experiences, the “not-me” experience, is contained within the process of musical composition itself. In each piece of music, the classical composer explores the ramifications of musical material. A composer, upon creating an initial theme, contemplates the basic elements of its beauty or aesthetic propriety and develops its identity. One method that composers use to accomplish this is through the structure of the sonata form. For example, in the first movement of Beethoven’s *Fifth Symphony*, the exposition (the statement of the initial musical material) is followed by a section called the development. Typical development sections are composed by augmenting, diminishing, and reorganizing elements of music material introduced in the exposition. In the development of this first movement, Beethoven does just this: dissects, splices and rearranges the music elements of the exposition’s material. The composer is not interested in embellishing the superficial aspects of the music’s beauty; but rather, in an intellectual exploration of the validity of the musical material itself. The composer willingly

destroys the contour of a beautiful melody in order to further develop it. Phrases are fragmented in order to change their perspective. Rhythms are exploited or interrupted in order to enhance the sonic message of the movement.

Each compositional technique affects the identity of the original material, and transforms the listener's perspective of the original musical theme or exposition. This reappraisal of musical elements from the exposition to the development section of the musical sonata form is a parallel for the therapeutic experience of the "me" and "not-me" experience. The "consciousness" of the music is expanded, the "me" which characterized the exposition is transmogrified in the intellectual processes of the development, allowing the resultant "not-me" to be less threatening, and hence, more easily incorporated by the psyche. The music serves as a model, an evocative musical space for accessing unconscious thoughts, repressed memories, solutions to problems, buried positive aspects of the self, and experiences of a transpersonal or spiritual nature. Accessing unconscious thoughts, positive personality attributes, and repressed memories formerly buried under defenses is analogous to the composer's uncovering of musical possibilities previously unexplored in the exposition. The weighing and choosing of solutions to life problems are analogous to the composer's "trying" various solutions and presenting them as musical possibilities for the listener.

The listener is not aware of the technical devices by which Beethoven molded his first movement of the *Fifth Symphony*. Rather, he experiences the previously unprecedented as Beethoven marries musical ideas which seem irreconcilably antithetical: the normal concept of time, wherein the past is unalterable and the future uncontrollable, is metamorphosized; the past and future becoming contained in the present. In a GIM session, with verbal support and guidance from the music therapist, a client can access therapeutically significant unconscious memories and generate solutions to life dilemmas, to delve into both the past and the future, with the goal of physical, emotional, cognitive, and spiritual transformation.

#### *Gaining Access to the Collective Unconscious: The Transpersonal*

Music is not defined by the moment, but rather as an accumulation and melding of memories. As the composer develops the musical material of his piece, the listener is still



experiencing the original material of the exposition, but from a different perspective. This simultaneous experiencing of the original musical material (the “me”) and all of its metamorphoses (the “not-me”) allows for the suspension of linear time, and thus an altered state of consciousness. This altered state allows the listener to become “one” with the music, actually loosening the boundaries of the personal identity. The listener is thus totally receptive, and in tune with the healthful processes of self-actualization paralleled in the structure of the music provided by the therapist. In becoming one with the music, a client can go beyond the personal unconscious and enter into the realm of transpersonal experience, the realm of the collective unconscious provided by classical music.

What does Beethoven’s *Fifth Symphony* mean? How do different individuals listening to it derive disparate psychological meanings from it? A great piece of music communicates specific archetypal messages which are the same in their significance for all of humanity. This would explain how a work like Beethoven’s *Fifth* is so universally acclaimed generation after generation. However, though two people may agree upon what Beethoven’s *Fifth, first movement* means, one hundred people will not. Is the first movement heroic or ominous or both? Is it neither? At its premier performances the *Fifth* evoked remarkably different reactions. The French musician, Jean Leseur found it exciting; the German, Louis Spohr, found it lacking in dignity, and it is reported that members of the London Philharmonic found it facetious. Movies have used the *Fifth* to characterize military action and, contrarily, intellectual pursuit. The movement has been used to sell a brand of pain reliever and breakfast cereal. Since its premiere, it has acquired “accepted” meanings, but these are just the attributes of people with whom its ineffability does not sit well. Compare, for instance, a less familiar work by Beethoven which has not been so frequently and insistently categorized and straight-jacketed: the *Marcia Funebre* from Beethoven’s *Piano Sonata, Opus 26*. The *Marcia Funebre* is defined by Beethoven as a funeral march. But, is it funereal? The movement is written in a minor key; which mode is labeled “sad” by shallow analysts; but if “sad” describes minor, then how explain the *Marcia Funebre*’s transition at the end to major? Indeed, if the *Marcia Funebre* is symbolic of death, why does Beethoven continue the sonata after this movement? Beethoven had no desire to

restrict our contemplation of Opus 26 to his own motivations in composing it. His title may be viewed as an “opinion” or perhaps a rhetorical device – an argument. Whether the piece is about death, rebirth, peace, or whatever is really not Beethoven’s business any longer. It is ours. Individually, we determine its content. Beethoven only gives us the structure. He does not compel us to feel one way or another.

Beethoven may not have been particularly an enlightened or transcendent human on a personal level, but when Beethoven wrote music he transcended the “me” and reached the “not-me.” Beethoven’s music does not require an understanding of Beethoven’s personality, nor can we comprehend his music fully by studying his comments regarding it. These are his personal views. Of the *A Minor String Quartet, Opus 132*, much has been written of the personal meaning of the third movement, “Heiliger Dankgesang eines Genesenen an die Gottheit,” but one does not need liner notes to appreciate the work, nor can liner notes account for our diverse reactions to the movement. Indeed, Beethoven could write pieces of extremely contrasting moods regardless of his personal circumstances. He followed the *A Minor Quartet* with the *Grosse Fugue*, his most uncompromising work, while simultaneously churning out dozens of meretricious folk song arrangements. His great works exceed him. They soar above the personal details of his life and attain a level of universal meaning. Bruckner was a passionless, pitiful individual; Wagner, a vile anti-semitic protonazi; Mussorgsky, a lazy alcoholic; Schumann, a manic-depressive. But their music does not reflect their personal frailties. Great composers communicate a transpersonal message beyond their individuality and beyond their personal lives. Composers die, but their music transcends past, present, and future.

### **Conclusion**

The GIM process utilizes classical music in an altered state of consciousness to provide an evocative musical space for the purpose of exploring personal and transpersonal phenomena in therapy. In GIM, time is obliterated. The client gains immediate entry to his past, present, and future possibilities. The therapist supports, through the use of the classical music, a timeless musical working space for the client. Music which is current, restricted to our lifetime (familiar, popular, or preferred) has clear boundaries which enable us to be fully in the present, or to

remember our past associations. These boundaries are necessary and helpful in supportive therapy; however, therapy is change. And change occurs in the future. It is music which is timeless and has no defined meaning to bind the listener which is able to catalyze deep physical, emotional, cognitive and spiritual change through addressing existential issues. Eagle and Harsh report that, “Music alters time because music is time” (1988, p. 22). The fictional composer Adrian Leverkühn explains, “Relationship is everything. . . . And if you want to give it a more precise name, it is ambiguity. . . . Music turns the equivocal into a system” (Mann, 1949, p. 49) – a system with structure, but with no concrete association. The music knows the answer; it is up to the client to bring in his difficulty, and to allow the music to guide him to its origin, or perhaps its solution.

In GIM goals are set and are accomplished through introspection within an evocative musical space. Classical music provides a new perspective for problem solving, reflecting the musical problem solving of the composer. GIM works because of the music, which seems, as Steiner (1971) relates, “to gather, to harvest us to ourselves” (p. 122). “Perhaps it can do so because of its special relation to the truth. . . . It is here that the affinities of music with needs of feelings which were once religious may run deepest” (p. 121). Perhaps the task of verbalizing the effect of the aesthetic experience on the human condition is beyond the boundary of possibility; yet, in music therapy we know it is real as we witness its transformative therapeutic effects. Certainly, it is time for the field of music therapy to address the neglected study of the aesthetic domain.

### References

- Adorno, T. (1991). *In search of Wagner* (R. Livingstone, Trans.). (3<sup>rd</sup> Ed.). Manchester, England: NLB.
- Bonny, H. (1978a). *Facilitating guided imagery and music sessions. Monograph #1*. Salina, KS: Bonny Foundation.
- Bonny, H. (1978b). *The role of taped music programs in the GIM process. Monograph #2*. Salina, KS: Bonny Foundation.

Bonny, H. & Tansill, R. (1977). Music therapy: A legal high. In G. Waldorf, (Ed.). *Counseling therapies and the addictive client* (pp. 113-130). Baltimore, MD: University of Maryland School of Social Work and Community Planning.

Bruscia, K. (1987). *Improvitational models of music therapy*. Springfield, IL: Charles C. Thomas Publisher.

Bruscia, K. (1989). *Defining music therapy*. Spring City, PA. Spring House Books.

Burrows, D. (1990). *Sound, speech and music*. Amherst, MA: University of Massachusetts Press.

Eagle, C. & Harsh, J. (1988). Elements of pain and music: The aio connection. *Music Therapy*, 7(1)15-27.

Goldberg, F. (1989). Guided imagery and music as group and individual treatment for hospitalized psychiatric patients. Unpublished manuscript. Salina KS: Bonny Foundation.

Kenny, C. (1982). *The mythic artery*. (3<sup>rd</sup> ed.). Atascadero, CA: Ridgeview Publishing Company.

Mann, T. (1949). *Doctor faustus*. (H.T. Lower Porter, Trans.) Middlesex, England: Penguin Books.

Nolan, P. (1989). Music therapy improvisation techniques with bulimic patients. In L.M. Hornyak & E.K. Baker (1989). *Experiential therapies for eating disorders*. New York, NY: Guilford Press.

Nordoff, P. & Robbins, C. (1977). *Creative music therapy*. New York, NY: John Day Company.

Noy, P (1968). The development of musical ability. *Psychoanalytic Study of the Child*, XXIII, 332-347.

Steiner, G. (1986). *Language and silence: Essays on language, literature, and the inhuman*. (7<sup>th</sup> ed.). New York, NY: Atheneum.

Steiner, G. (1971). *In Bluebeard's castle: Some notes towards the redefinitions of culture*. New Haven, CT: Yale University Press.

Summer, L. (April, 1988). Comparing genres of music for therapy. *Proceedings of the Second Music and Health Annual Conference*, Eastern Kentucky University, 94-105.

Summer, L. (1988). *Guided imagery and music in the institutional setting*. St. Louis, MO: MMB Music, Inc.

Winnicott, D.W. (1969). The theory of the parent-infant relationship. *International Journal of Psychoanalysis*, 50, 711-717.

## 1.2. Transition to Publication 2

*Considering Classical Music for Use in Psychiatric Music Therapy* (published in *Music Therapy Perspectives*, 1994, 12, p. 130-133) is an argument against a prescriptive, medical model approach in psychiatric music therapy. During this same time period, I was writing a book, *Music: The New Age Elixir* (Summer & Summer, 1996); a critique of music healing practices. I reviewed in depth the publications of approximately a dozen music healers of the late 1980's who claimed to be using a holistic, new age approach. My analysis of each music healer's philosophy showed a practice that was not holistic as they claimed, but rather was consistent with a reductionist approach to music healing; using either a medical or behavioral model. Because I was so involved in analyzing the theory and practice of music healing practitioners according to medical model principles, I began to use medical model thinking to critique the concept of theme-oriented music programming in GIM. To begin, the article presents the nature of classical music as essentially non-programmatic, and subsequently two strategies are examined: matching through affect attunement (Stern, 1985) and theme-oriented matching.

The article explains matching through affect attunement as a "musical reflection of a subjective inner state" (p. 131). This strategy creates a musical environment that reflects aspects of the client's inner feeling state with sound. This concept is explored through an analysis of spontaneous clinical improvisation using Daniel Stern's "affect attunement" as its theoretical basis. For example, a question is asked: How does a music therapist match a child's arm-banging musically? The answer: the therapist does not merely translate the rhythm, intensity, and tempo of the arm-banging into sound; the therapist can actually translate the quality of

feeling behind the child's behavior into music (affect attunement). Subsequently, the point is made that when music therapists utilize pre-recorded classical music for therapy, it should also be accomplished utilizing affect attunement; the music's exposition should be an "auditory environment reflective of the client's inner state" (p. 132).

The article analyzes and criticizes the theme-oriented approach to choosing classical music for psychiatric clients. The article's initial argument compares the specific nature of popular music which incorporates lyrics with specific meanings with the more ambiguous nature of classical music. Music therapy clinicians who use popular music with psychiatric clientele choose songs whose lyrics identify a specific topic or agenda around which the session will revolve; a valid strategy with the genre of popular music. However, "there can be no effective music therapy process which uses such simplistic solutions as labeling a piece of classical music with a particular feeling . . . or clinical issue" (p. 133). This is an overt disagreement with GIM therapists' common practice of using a theme-oriented matching approach to select music for GIM sessions. Although it is not mentioned directly, the article indirectly critiques Helen Bonny's theme and mood-oriented approaches to the design and naming of music programs for GIM sessions. For example, in her early work *Music and Your Mind*, Bonny indexed selections for imagery (Bonny & Savary, 1990). In later work she states, "Selections with well-integrated and clearly focused moods seem to have a more pronounced effect upon the GIM listener than music with frequent or abrupt mood changes. It follows that the specific mood or emotion communicated by a particular musical composition is of considerable importance in planning a program of music for GIM" (Bonny, 1978b/2002, p. 307).

This article advises music therapists, including GIM therapists who work with classical music, against using thematic matching principles, even though these principles are effectively and commonly utilized for choosing therapeutic popular music. Classical music is complex; it should not be straight jacketed or simplified. It should not be used as a representational language, for example matching a "sad" piece to a "sad" client. Unless it is programmatic, classical music should not be used to enforce a specific theme or agenda upon its listeners. "This

simplicity is akin to a prescriptive, medical model approach, wherein a specific piece of classical music can be defined, and considered treatment for a specific inner state or diagnosis” (p. 133). This is because two clients, or a therapist and a client, are not likely to discern a common psychological issue from hearing a piece of classical music. Since the effectiveness of classical music lies in its inherent ambiguity, it is recommended that GIM therapists, and other music therapists who work with classical music, utilize matching principles from Stern’s affect attunement (principles which are effectively, and commonly, utilized in spontaneous improvisation). This article is a precursor to, and proposes a theoretical background for, the method of choosing music programs for the music-centered GIM sessions in the present research study.

---

**SUMMER, L. (1994). CONSIDERING CLASSICAL MUSIC FOR USE IN PSYCHIATRIC MUSIC THERAPY  
MUSIC THERAPY PERSPECTIVES, 12, p. 130-133**

Too many analysts of classical music want to straightjacket compositions into specific emotional or programmatic interpretations. What does Beethoven’s *Fifth Symphony* mean? How do different individuals listening to it derive disparate psychological meanings from it? Does a great piece of music communicate specific archetypal messages which are the same in their significance for all of humanity? If so, this would explain how a work like Beethoven’s *Fifth* is so universally acclaimed generation after generation; however, although two people may agree upon what Beethoven’s *Fifth, first movement*, means, one hundred people will not. Is the first movement heroic or ominous or both? is it neither? At its premiere performances, the *Fifth Symphony* evoked remarkably different reactions. The French musician, Jean Leseur found it exciting, the German, Louis Spohr, found it lacking in dignity, and it is reported that members of the London Philharmonic found it facetious. Movies have used the *Fifth* to characterize military action and, contrarily, intellectual pursuit. The movement has been used to sell a brand of pain reliever and breakfast cereal. Since its premiere, it has acquired “accepted” meanings, but these are just the attributes of people with whom its ineffability does not sit well. Compare, for instance, a less familiar work by Beethoven which has not been so frequently and insistently

categorized and straight-jacketed: the *Marcia Funebre* from Beethoven's *Piano Sonata, Opus 26*. The *Marcia Funebre* is defined by Beethoven as a funeral march. But, is it funereal? The movement is written in a minor key; which mode is labeled "sad" by shallow analysts; but if "sad" describes minor, then how explain the *Marcia Funebre*'s transition at the end to major? Indeed, if the *Marcia Funebre* is symbolic of death, why does Beethoven continue the sonata after this movement? Beethoven had no desire to restrict our contemplation of Opus 26 to his own motivations in composing it. His title may be viewed as an "opinion" or perhaps a rhetorical device – an argument. Whether the piece is about death, rebirth, peace, or whatever, is really not Beethoven's business any longer. It is ours. Individually, we determine its content. Beethoven only gives us the structure. He does not compel us to feel one way or another.

Classical music's effectiveness as a therapeutic tool lies in its ambiguity, its ability to stimulate significantly different individual responses. The meaning a music therapist gleans from the first movement of Beethoven's *Fifth Symphony* is not likely to be the meaning the client discerns; and two clients are unlikely to discern a common psychological issue from hearing it.

Classical music should not be utilized as a representational language in psychiatric music therapy, for instance, matching a "sad" piece to a "sad" client. Therapists who attempt to force a representational meaning upon classical music are perhaps innocently adopting a strategy which is utilized with popular music. As a genre, classical music, except for opera, song cycles, and the like, does not utilize words to enforce a particular theme upon its listeners. Popular music, on the other hand, is an effective representational therapeutic tool. It consists primarily of songs with lyrics which have specific meaning. When James Taylor sings, *You've Got a Friend*, there is no mistaking the basic meaning of the song. There is ambiguity in the song's lyrics, and that ambiguity allows each psychiatric client his individual response to the lyrics; however, the therapeutic work with each client is clearly predetermined by the song's stated subject. The therapist and client can deal with no other subjects than "feeling down" and friendship. If a therapist plays *Eleanor Rigby*, there is no question but that the issue is loneliness. When Grace Slick sings about "Alice," the issue is drugs. Popular music with lyrics provides a highly effective musical environment for therapeutic purposes. It provides a specific "common ground"



upon which the music therapist bases the content of a session, but that is where its similarity to classical music ends. When a music therapist forces a specific programmatic interpretation upon a piece of classical music, it reduces its ambiguity and, hence, its therapeutic effectiveness.

If the therapist cannot determine that specific classical pieces represent loneliness, friendship, or drug use, as with popular music, then how is it possible to choose a classical piece of music for a client who is sad? If a piece of classical music does not represent a specific feeling or an image literally, then how can a music therapist match a client's depressed state with classical music? Is it possible for a music therapist to match a client's depressed state with classical music? Is it possible for a music therapist to match a client's inner feeling state with a musical language as ambiguous as classical music?

### **“Matching” as a Therapeutic Technique**

Evidence to support the technique of matching an inner feeling state with ambiguous sound is found in the observational parent/child dyad studies of Stern (1985). In one study, Stern observed the behavior of a mother while she played with her child. During their interactional play, the child stretched his arm out to reach for a toy just beyond his grasp. The mother, interacting with her son while he reached, vocalized, “Uuuuuuuh . . . uuuuuuuh,” with a crescendo, increasing dynamic until the child finally grasped his toy. When he had grasped the toy, she stopped her vocalizing. Stern coined this type of interaction, “affect attunement,” which he defined as a natural interaction between parent and child in which a parent expresses the quality of feeling of a child's affective state recast in a different form. Affect attunement is a kind of imitation which shifts the focus of attention from the behavior itself “to what is behind the behavior, to the quality of feeling that is being shared” (p. 142). Stern's phenomenon of affect attunement consists of the following components:

1. There is not a faithful or exact rendering of the infant's overt behavior, but the impression is that a kind of imitation has occurred. The two expressions share a common quality. (In this example the mother's vocalizing and the child's reaching arm shared the same intensity, duration, and shape.)

2. The matching is largely cross-modal. The modality of the mother's expression is usually different from the modality used by the infant. (In this example, the modalities are movement and ambiguous sound.)
3. "What is being matched is not the other person's behavior *per se*, but rather some aspect of the behavior that reflects the person's feeling state. The ultimate reference for the match appears to be the feeling state (inferred or directly apprehended), not the external behavioral event" (pp. 141-142).

Developmental researchers have observed and identified many types of imitative behaviors (empathy, mirroring, echoing) in parents during interactional play with their infants. Affect attunement, though, is a type of imitation which, Stern believes, is of paramount importance to early childhood development because affects are the primary subject of communications between parent and child in early infancy. Hence, it is through the parent's affect attunements that the infant comes to understand that subjective inner states (such as feelings) can be shared, and that the sharing of feelings can lead directly to the development of a relationship.

The psychiatric music therapist's matching techniques in the early stages of the music therapy process are akin to a parent's use of affect attunement when the intention of the therapist is to develop a relationship with the client(s), and to reflect the inner state of the client(s) through the use of ambiguous music. When the music therapist utilizes a matching technique with ambiguous music (as opposed to the use of popular music with lyrics in which the matching is accomplished in a representational manner as discussed earlier), a musical environment which reflects aspects of the client's inner feeling state is created. The client then becomes receptive to the music and to the therapeutic relationship, and also comes to understand that internal feeling states are shareable, communicable, and a vital part of the development of healthy interpersonal relationships. It is in this state, created through a musical reflection of a subjective inner state, that the client can feel the safety to actively express his inner state musically and/or verbally.

Stern's studies regarding parent/child affect attunement not only support the basic foundation of the psychiatric music therapy process (the establishment of the therapist/client

relationship through the modality of ambiguous music) but further trace the origins of this process to the nonverbal, natural interactional patterns which take place in the parent/infant dyad. Although Stern's studies can be applied to techniques which use ambiguous classical music for therapy, they are related in a more direct manner to the technique of spontaneous clinical improvisation in psychiatric music therapy.

### **“Matching” Through Improvisation**

Spontaneous clinical improvisation is a therapeutic technique in which musical material is created spontaneously by the therapist and client and developed through their musical interaction over time. (Although spontaneous improvisation can utilize words, phrases, and lyrics, these possibilities are not addressed here.) A music therapist's spontaneous clinical improvisation with a child who has autism might begin in the same manner as the aforementioned example of Stern's affect attunement between mother and child. For example, the music therapist might begin by imitating the client's banging arm movements using the piano, matching one or more of the qualities of the child's arm movement with elements in the music. The music therapist is not merely translating the rhythm, tempo, and intensity of the child's overt movements into the modality of sound, but rather, is matching some aspect of the child's arm-banging that reflects a feeling state. Perhaps the child's banging is expressing frustration, or perhaps it reflects anger or anxiety. The therapist need not identify or delineate the child's specific feeling into words; rather, the therapist translates the inner feeling directly into the modality of music. The therapist spontaneously creates a musical environment which is an auditory mirror of aspects of the child's inner feeling state.

The musical improvisation then develops in a manner which is largely based upon the client's musical responses in the moment and the goals of the therapist. The music therapist develops the musical material carefully by taking note of the client's responses to the music. If the therapist modulates into a different key, the child may follow the modulations, or he may withdraw or become agitated. His emotional reactions will be evident in his musical and emotional responses to the therapist's modulation. The client's responses enable the music

therapist to ascertain whether the music is developing in a manner which parallels the client's emotional and interactional capabilities.

### **“Matching” Through Classical Music**

When the psychiatric music therapist is utilizing a technique which involves the use of classical music for a client, she does not have the opportunity to develop the music according to the client's responses in the moment as can be so readily accomplished with spontaneous improvisation. Despite the fact that classical music is precomposed rather than spontaneous, the technique of matching a client's inner state with a piece of classical music is very similar to the matching techniques used in clinical improvisation. The key to the matching technique is twofold. First, it is essential to study the elements of a classical piece of music (rhythm, tempo, timbre, tessitura, harmony, melody) as they are presented in its exposition, the opening measures of the piece. By matching these elements in the music's exposition with qualities of the client's behavior which are reflective of the inner feeling state, the music therapist provides an “affective attunement” through classical music. Just as the mother matches her vocalizing to the qualities in her child's arm-reaching and the therapist renders the qualities of a client's arm movements in the opening sonorities of a spontaneous piano improvisation, the music therapist chooses a piece of classical music whose exposition provides an auditory environment reflective of the client's inner state.

Secondly, in choosing a piece of classical music for the client, the music therapist must be aware of the form of the piece, the manner in which the composer accomplishes the development of the musical material over time. The classical composer begins his exposition with an initial statement of thematic material and subsequently explores the ramifications of this musical material. Each compositional technique used affects the original musical material, transforming the listener's perspective of the original exposition.

For example, in the first movement of Beethoven's *Fifth Symphony*, Beethoven dissects, splices, and rearranges the elements of the exposition's material, uncovering musical possibilities inherent in the original theme. As Beethoven develops the potential of his theme, the listener still experiences the original material of the exposition but from a different perspective. This

simultaneous experiencing of the original musical material and all of its metamorphoses allows for the suspension of linear time and, thus, an altered state of consciousness.

When the music therapist is able to provide a piece of ambiguous music whose exposition accurately reflects the psychiatric client's inner state, the client experiences a sense of recognition. In the altered state of consciousness stimulated by the music, the client becomes immersed in the musical reflection of himself allowing him to identify with the music, to become "one" with it. He is thus totally receptive and in tune with the healthful developmental processes paralleled in the structure of the development of the music. Although the client is not aware of the technical devices by which Beethoven molded his movements, the compositional techniques used in the exposition and development sections are the key to the effectiveness of using classical music to reach therapeutic goals with clients in a psychiatric setting.

## **Conclusion**

Matching a client's inner state with a piece of classical music is a complex issue with many variables. Classical music is a sophisticated genre of music, and it is not composed to reflect a specific inner state; it is ambiguous. And clients in a psychiatric setting are no less complex nor individual in their makeup than classical music.

Utilizing classical music for therapy is significantly different from the use of popular music with lyrics because, with popular music, the lyrics identify a "program," a specific agenda around which the session will revolve. In the case of popular music, representational matching techniques are valid; however, when utilizing classical music for psychiatric clients, music therapists should not be seduced into the kind of representational matching which is efficacious for popular music. There can be no effective music therapy process which uses such simplistic solutions as labeling a piece of classical music with a particular feeling, such as sadness, or identifying it with a particular clinical issue, such as depression. This simplicity is akin to the medical model approach, wherein a specific piece of classical music can be defined, and considered treatment for a specific inner state or diagnosis such as with depression.

Classical music is not composed with the intention to affect all persons in the same manner. The Funeral March from Beethoven's *Opus 26 Piano Sonata* can be therapeutic

whether the client hears it as funereal or regal. Medicine works in a simple, direct way upon specific illnesses. Whereas the medical model depends upon a relatively reliable, uniform response to medication, the music therapy process hinges upon each psychiatric client's individual reaction to a musical piece.

Spontaneous clinical improvisation without words and classical music without words are similar forms of treatment in music therapy because both genres are so ambiguous as to be able to match inner states effectively without implying a specific therapeutic agenda or a particular feeling. This ambiguity allows the expression of unspecified feeling states, whereas popular music with lyrics is representational and addresses specific therapeutic issues and feelings.

How can music therapists become skilled in the technique of reflecting a client's inner feeling state in classical and improvisatory music? How can therapists become adept at melding ambiguous musical and psychological processes? The theoretical study of the elements of music, especially form, is necessary. Another essential ingredient for developing those skills is the therapist's personal relationship with classical music. The music therapist must become comfortable and proficient in the expression of one's own inner subjective states through the language of classical music and of spontaneous improvisation. It is through the study of classical music along with the daily practice of expressing inner subjective states that the music therapist becomes able to meld the musical with the psychological, to create effective psychiatric music therapy for clients.

### Notes

- Portions of this paper are adapted from the previously published article, "Music: The Aesthetic Elixir."
- I would like to thank Fran Goldberg, Dag Körlin and the reviewers of this article for their cogent suggestions which provided me with invaluable assistance in its formulation.

### References

- Stern, D.N. (1985). *The interpersonal world of the infant*. New York, NY: Basic Books.
- Summer, L. (1992). Music: The aesthetic elixir. *Journal of the Association for Music and Imagery*, 1, 43-53.

---

### 1.3. Transition to Publication 3

*Melding Musical and Psychological Processes: The Musical Space* (published in the *Journal of the Association for Music and Imagery*, 1995, 4, 37-48) further develops the basic psychodynamic concepts of “me” and “not-me” (from article one; Winnicott, 1969) and the correlation of the parent/child dyad with the therapist/client dyad. However, the “me,” “not-me” is abandoned in favor of the terms “holding” and “stimulation” (also from Winnicott, 1969) and the introduction defines and relates the concepts, “transitional space” (Winnicott, 1969) with “musical space” (Kenny, 1989), thereby bridging psychological and musical process – the goal of this article.

Expressive music therapy techniques utilize live music, and whether the music is improvised or precomposed, both the music and the music therapist can be immediately responsive to the spontaneously expressed needs of the client. This article grapples with the dilemma of the GIM therapist who, in using a receptive music therapy technique, loses the responsiveness that live music affords the client. The article presents the dilemma of the GIM therapist by posing a single question around which the article is structured: “How (then) can the GIM therapist choose a music program which is responsive to the client’s evolving process during a session” (p. 39)?

First, the psychological concept of an emotional home base is reconciled with the music therapy concept of the iso principle (Altshuler, 1948, 2000; Gouk, 2000, Bonny, 1989/2002). The development of the musical space in the GIM session is then explained within the framework of Winnicott’s “good-enough mothering strategies.” The article’s first conclusion is the general one— that the GIM guide must be akin to a good-enough mother. Winnicott’s term, good-enough mothering, indicates that although the mother does not need to provide perfect nurturing, it must not be too supportive, or too challenging for her child. The same strategy is suggested for the GIM guide: to provide classical music that is “good enough.” This means that in order to be therapeutic, the music should neither be too supportive nor too stimulating for the client.

The article makes some specific parallels to nurturing, for example the nature of the Pachelbel *Canon* is characterized as “symbiotic.” The article continues to identify contraindications for GIM treatment. The concept of a parallel emotional/musical home base is explained through the description by which the GIM therapist chooses a piece whose musical home base matches the client’s emotional home base. The primary concepts that bridge psychodynamic and music-centered theory are defined as holding and stimulation. Holding is described as the musical matching of a client’s emotional home base within the context of a GIM session; stimulation is defined as musical/emotional development beyond home base.

To illustrate these concepts there is a five page analysis of Mozart’s *K331 Piano Sonata* (the theme and four variations from the first movement). The article uses Mozart’s development of the simple theme in the first four variations to demonstrate how the development of musical material parallels the stages of the separation-individuation process. Through a description of the musical elements of each variation, and the manner in which each element relates to the original theme, the article demonstrates how musical development is analogous to child development within the mother-child dyad. The descriptions of the nurturing strategies of the mother (the left hand accompaniment) and the psychological growth of the child (the melody) over time reveal a profile of a healthy mother and child dyad in which the child (right hand melody) individuates/develops away from the mother (left hand accompaniment). Rather than analyze a complex orchestral piece of classical music that would typically be used for a GIM session, I chose Mozart’s *K331 Piano Sonata* because of its simplicity.

The article’s conclusion advocates the following answer to its initial question (how does the GIM guide choose pre-composed music for a client?): GIM guides need to gain an understanding of how musical and psychological concepts are inherently melded together in classical music and then each GIM therapist must “develop his/her own descriptive method” in order to “gain conscious awareness of the elements of holding and stimulation inherent in the musical space” of pre-recorded classical music (p. 46).

In his recent book, *Music-Centered Music Therapy*, Aigen wrote (Aigen, 2005):



“Lisa Summer (1992, 1995) has proposed a theory for the mechanisms of self-actualization in Guided Imagery and Music that is based on the specific elements of musical development in the works of Western classical music and that has a parallel in the developmental theories of D.W. Winnicott. . . The crux of her theory is considering how the composition of Western classical music can be understood as a parallel to this three-stage process that 1) begins with one sense of one’s self, 2) involves a transitional encounter with that which is unfamiliar or threatening, and 3) concludes with an incorporation of the unfamiliar into the sense of self. Summer’s incorporation of Winnicott’s ideas is in the spirit of bridging theory. . . his [Winnicott’s] ideas about child development are invoked in a parallel fashion to help her to better explain the mechanisms of the GIM process” (p. 294-5).

Within the framework of his development of music-centered theory, Aigen finds that this article contributes both to the development of that theory and to the bridging of psychodynamic and music-centered theories. This article’s topic is very similar to article 1, but it includes a more developed examination of the issues related to choosing music in GIM sessions. It is a precursor to the primary research issues of this study which explore how the GIM client experiences the music program.

---

**SUMMER, L. (1995) MELDING MUSICAL AND PSYCHOLOGICAL PROCESSES  
JOURNAL OF THE ASSOCIATION FOR MUSIC AND IMAGERY, 4, 37-48.**

The therapeutic process which takes place within the client-therapist relationship is akin to a re-enactment of the mother-child dyad in which the mother creates a healthy environment for her child's optimum physical and psychological development (Winnicott, 1962). The child's developmental process, called separation-individuation (Mahler, Pine, & Bergman, 1975), begins with the newborn in a symbiotic, dependent relationship with the mother. But, in the early months of life as the child's physical coordination and his ego strength increases, he begins to willfully distance himself from the mother. His first periods of separation from the mother are short-lived, infrequent, and punctuated by frequent returns to the supportive nurturance of her

arms. Over time, the child becomes able to venture further from the mother; and he becomes absorbed in his own world of play more often, and for longer periods of time. Eventually, by introjecting the mother's nurturance he can carry her emotional support with him as he matures, leaving the sphere of the mother altogether.

### **Exposition: The Beginning of the Musical Space**

During the child's separation-individuation process, the healthy mother develops a nurturing strategy which addresses her child's emotional needs. In the early symbiotic relationship, the mother's consistent holding is essential. Her nurturing arms create a feeling of security, an emotional "home base" from which the child can feel free to explore, as well as to which he can always return. It is not unreasonable to consider the beginning of each GIM session like the symbiotic beginning of the mother-child dyad wherein the mother's holding establishes a "home base" for the child.

The emotional home base of the GIM session is the client's inner state, and the GIM therapist's task is to provide a musical home base which is an auditory reflection of the client's inner experience. The musical space of a GIM session begins with the opening sonorities of the music chosen by the therapist. When the elements contained in the music's opening material (the tempo, timbre, harmonies, etc) are reflective of the client's inner state, the client experiences being "held" by the music. This reflective matching is the first key to choosing a piece of music for a GIM client, for without providing a matching home base for the client, he will not feel the nurturance necessary to travel freely during the session. An effective musical home base gives the client a feeling of safety, of the availability of the therapist, and prepares the client to deeply experience the music of the session. In this way, the music (and the GIM therapist) serves as mother; the beginnings of the musical space being akin to the symbiotic, holding nurturance of the early mother-child dyad. In fact, this kind of matching technique, called the iso principle, is utilized in all forms of music therapy to create the beginnings of the musical space. For example, the music therapist utilizing improvisatory techniques begins the improvisatory musical space by creating a musical exposition which matches the client's behavior and/or inner state.

(For a further discussion about matching the elements of the music's exposition to a client's inner state in GIM and improvisational techniques see Summer, 1994.)

### **Development: The Continuation of the Musical Space**

Once a musical home base has been established, the GIM client, like the individuating child, begins to feel the desire to explore. Just as the mother should not continue to hold or protect her child when he is ready to leave her arms to explore, the GIM therapist need not continue to "hold" the client musically once a musical home base has been established. In fact, regarding mothering strategies, Winnicott (1962) suggests that the mothering environment should be "good-enough," by which he means that the mother must provide nurturing which is neither too supportive, nor too challenging, for her child. The mother who continues to hold her child in her arms when he is capable of independent play will stifle his development. Contrarily, if the mother withdraws her symbiotic nurturance and pushes the child towards independent play before he is emotionally ready, the child will become overwhelmed with anxiety. This will also hinder the child's natural growth towards independence. Too much holding induces complacency; stimulative experiences which are too frequent, too soon, or too threatening induce unmanageable anxiety. The good-enough mother develops a flexible, nurturing strategy in which she encourages and stimulates the child during his venturing periods, and holds the child when he is emotionally needy.

In GIM, once the home base has been established and the client is ready to explore, the good-enough therapist provides a wider, more stimulating, musical terrain. However, the strategy of matching and holding which was so effective for the beginnings of the musical space are not useful for its development. The GIM client changes from moment to moment, moving through a myriad number of feelings, images, thoughts and body sensations; in fact, often experiencing many simultaneously within a session. The GIM therapist cannot continue to utilize a matching technique, matching music to the client's experiences subsequent to the music's exposition because it is not possible, nor even desirable, to determine the path that any GIM session will take. The GIM therapist need not literally "match" the client as he travels from one experience to another; for example, providing intense music during moments of intensity and

quiet music for quiet encounters; but rather, the music chosen must be good-enough for the client in two regards: providing adequate, but not too much, emotional holding and stimulation for exploration.

How, then, can the GIM therapist choose a music program which is responsive to the client's evolving travels during a session? In order to provide a musical space which is "good-enough" for a GIM session the therapist must be aware of how the music develops, or travels, away from its home base in relation to its qualities of holding and stimulation. It is the manner in which the musical material develops subsequent to the exposition which continues to define the musical terrain available for the client's travels; and since each piece of classical music develops differently, the next step is to ascertain the manner in which various choices of music develop. Although it is not necessary to fully analyze a piece of music to utilize it for GIM, it is crucial to study the music's development, its form, especially in relation to the variables of holding and stimulation. Rather than attempting to find music which matches any specific feeling, issue, or imagery experience, the therapist can develop a profile of the client's needs in regard holding and stimulation and then choose music which provides a good-enough musical mothering strategy.

### **Examples of the Musical Space**

#### **Pachelbel *Canon in D***

For example, musically, the Pachelbel *Canon in D* is the quintessential symbiotic mother, keeping the child at her breast. Caressing waves of consonant accompaniment are added throughout the piece, assuring the child that all will remain the same. There is no place to go, no reason to leave the mother's arms. The piece serves as a nurturing, supportive lullaby. For the client, there is no tension or expectation to act.

Pachelbel's misnamed canon (it is actually a passacaglia) has only five harmonies. They are repeated in the same order for the duration of the piece, which is basically an eight-measure theme with variations (I, V, vi, iii, IV, I, IV, V). Each iteration of the chord has the identical duration of one measure, and then begins the exact same pattern again. The trip away from the first chord is always the same trip, the same distance. There is never any exploration beyond the boundaries of the passacaglia harmony. All experiences in the Pachelbel *Canon* are restricted to

this endless, tiny circle of eight measures. There is no counterpoint, no secondary theme, no musical element develops or grows away from the original statement of the theme. Pachelbel erases all tension. There is not one beat of this piece which suggests growth or separation from the theme, the piece's home base.

Pieces of music as "symbiotic" as the Pachelbel *Canon in D* are rare in classical music; however, they can be found in certain schools of Baroque music (referred to, derogatorily, as sewing machine music) and in contemporary minimalist composers such as Phillip Glass, Steve Reich, and John Adams. But, music which contains little to no development is found easily in other genres, such as new age music, or popular music. Popular music, for example, consists primarily of no more than two to four musical ideas which are repeated without musical alteration throughout the duration of the piece.

The Pachelbel *Canon in D* is a rare example of classical music which provides symbiotic holding with no stimulation to travel. In the GIM session, pieces such as the Pachelbel *Canon in D* serve as a periods of holding or rest for the client during his traveling, like a child's return to the mother's arms for emotional refueling during a play session.

There are a myriad number of reasons to choose this kind of holding music, especially in clinical work with psychiatric clients with impaired ego strength. Bonny (1980), Goldberg (1994), Wrangsjö (1994), and Blake and Bishop (1994) discuss modifications of the GIM method which involve the choice of pieces whose form contains little to no musical development for their clinical work. For example, Goldberg (1994) reported that her hospitalized acute psychiatric patients were "likely to be confronted almost immediately with concrete representations of their conflicts accompanied by overwhelming anxiety" with the use of stimulative classical music (p. 22). She found that short pieces of structured, dynamically limited music helped her clients to produce symbolic images, to generate images of nurturance, and to increase their ability to concentrate upon their imagery experiences.

The therapist's clinical goals may dictate that s/he utilize supportive, simply structured music. When the goal of a session is to stimulate relaxation, a piece of music with repeated musical material which contains little or no development is indicated. Often, the therapeutic

approach or the nature of the treatment setting calls for a highly supportive music choice. Short-term treatment and crisis interventions are more likely to involve the use of significant holding musical experiences, often including non-classical choices.

However, in GIM, the defining characteristic of the method is its stimulative use of classical music. The GIM method uses classical pieces with complex musical development to encourage the client to move beyond the holding experience into exploration or "travel." Since the therapeutic goals of a GIM session center around addressing emotional issues, the therapist asks, "What type of musical space is good-enough for my client's traveling today? "What type of musical mothering will provide enough, yet not too much, holding and stimulation for my client?" Rather than attempting to find the "right" piece, the therapist can develop a profile of several music programs to identify a choice which is good-enough in regard the variables of holding and travelling.

At the beginning of each piece of classical music primary themes are stated; the tonality of the piece is determined; tempo, significant rhythms, timbres, and tessitura (range) are presented. These sounds establish the piece's musical "home base," from which one can track the the musical material as it develops. Like the Pachelbel *Canon in D*, a piece of music may stay close to home base, resembling the symbiotic holding of the mother-child dyad. Or the music may develop beyond its home base like a growing child separating from his mother. As a piece develops musically away from its home base, it creates tension within the GIM client and this tension will stimulate the client to explore, to travel. Music with significant development sections provides the client with the tension and energy to address conflictual emotional issues. Generally, a piece of classical music which stays closer to home base will provide a more supportive, holding musical space; whereas music which develops, or "travels," further from home base will provide a more stimulative musical space, a larger terrain upon which the client can travel. Each piece of classical music is composed in an individual manner, and contains elements of holding and traveling in various degrees. One cannot assume, for example, that two pieces in rondo form have the same profile. In order to choose which pieces or music programs are "good-enough" for a GIM client's session, it is essential to look at the manner in which the

classical composer accomplishes the development of the musical material of each individual piece of music (as well as the development of the music program as a whole).

**Mozart Piano Sonata, K331, movement 1** (see article appendix)

I have not chosen to describe a piece of music from the GIM tape programs because of their complexity; but rather, I have selected the first movement of the Mozart Piano *Sonata, K331*. This movement is relatively simple (it is written for one instrument - piano), with clarity of form (it is a Theme and Variations, with six clearly divided variations). I do not consider this piece a candidate for GIM.

In the following description, the opening Theme of the movement is seen as the musical/psychological home base from which each variation is derived. Mozart develops the musical material of the Theme differently in each variation of this sonata movement. The description of each variation reveals a profile of the mother-child dyad. As the variations progress, one can track the musical material as it grows and changes. These changes parallel the separation-individuation process of the child along with a view of the mother's nurturing strategies over time. Although I have never before been literal in the assignation of mother and child roles to particular parts of complex classical music, the simplicity of this piece lent itself to a description of the accompaniment voice as the mothering role, while the melodic material is seen as the child. Together, they define the musical space of the first movement of K331.

*The K331 Theme*

In his *K331 Piano Sonata, first movement*, Mozart uses only five chords for his Theme (of the theme and variations), two of which (the ii, and the V of V) are represented but fleetingly. The harmonic changes rock gently between the I and V chords. The melody does not even dare, for the most part, to venture outside the rhythm of the harmonic changes, matching it symbiotically note for note. There is barely any harmonic dissonance in the theme and there is but one single chromatic tone, on the third beat of the twelfth measure. Tension is absent from the theme. It is rare to find Mozart in such a childlike frame of mind in a first movement. The Theme from K331 is gentle enough for a newborn. Like a nurturing lullaby, its simplicity and absence of tension communicate a sense of holding, a feeling of assurance, and security. The

Theme is the home base of this movement. The first movement of Mozart's K311, however, is no simple exploration of symbiosis, like the Pachelbel *Canon*.

### *K331 Variation I*

In Variation I, Mozart shyly introduces tension. The melody of the Theme has been altered with the addition of chromatic appoggiaturas. For the first three measures Mozart avoids presenting the non-harmonic tone of the appoggiatura against the harmony, as if such minimal tension would be still too threatening. In measure 4, for the first time in K331, a chromatic tone outside of the prevailing harmony is heard. And yet, it is the gentlest dissonance possible: an augmented second. It is not until measure 10 of Variation I that Mozart presents a major seventh dissonance simultaneous with the harmony; and following that, in the next beat, with a second similar dissonance, and then, a third. Three beats of ephemeral dissonance, and then a retreat to the shy presentation of the opening of this variation. The dissonances in these three beats of measure 10 are as far as Mozart is willing to travel away from the harmonic home base which he has established.

In Variation I, Mozart not only ventures into areas of harmonic dissonance, but he also changes the character of the music by abandoning the rocking accompaniment patterns of the Theme. In measure 5 the music becomes forceful, and the dynamic marking "forte" appears for the first time. Rather than a legato left hand, Mozart employs an insistent ostinato. In addition, the left hand ventures down into the bass range further than it has previously. The melody is articulated insistently, as well, through the use of reinforcing block chords in the right hand. The change of temperament, of feeling, in measure 5 is startling.

This variation has clearly left the symbiosis of the Theme and presents a profile of a mother-child dyad in which the child has taken his first tenuous step towards psychological separation from the mother. Musically, Variation I has separated from its home base, the Theme. The accompaniment (the mother) has stopped its symbiotic, rocking motion. Now the mother provides the child with increased energy in the form of an insistent ostinato and the louder dynamic. She encourages the child to separate. Simultaneously, the child (the melody) begins to develop its own identity. Its chromatic appoggiaturas constitute a harmonic differentiation from



the accompaniment. The child is beginning to play and explore, to experience something other than the symbiosis of the mother. The child, and the first variation of K331 have begun their separation process.

### *K331 Variation II*

In Variation II, Mozart pulls the appoggiatura of Variation I down from the right hand, and places it in the midst of what one would expect to be the standard presentation of the harmony in the left hand. The result is an exquisite, dissonant harmony, a paradox of an accompaniment. What was previously an adventurous, exploratory musical element now appears, integrated into this variation's accompaniment. Above this eccentric accompaniment flies the melody. The melody has separated rhythmically from its accompaniment: the accompaniment is in triplets while the melody uses eighth and sixteenth note rhythms.

The child of this variation (the melody) is more distanced from his mother (the accompaniment) than in the previous variation. The melody of this variation has developed its own rhythms which are different from the triplet accompaniment revealing a profile of a child distancing, separating himself, from his mother's holding. The left hand has become absorbed in its own rhythmic identity. But, in measure 12 the variation abruptly returns to the Theme for three beats. It is no longer Variation II. (Because this second variation has been characterized rhythmically by perpetual triplets, the cessation of them in measure 12 is a more obvious regression to the Theme than measure 12 in the previous variation.) The last three beats of measure 16 in Variation II create the same feeling of return, though it is not a literal return, as is the case in measure 12. The increased distancing from the mother has necessitated this short return during the cadences to the symbiotic relationship of the Theme.

The mother-child profile of this variation is characterized by a strengthening of the child's separation from the mother. This variation musically explores the separateness of the melody and accompaniment through contrasting rhythms, punctuated by cadential returns to the original Theme. The sections of separation provide the GIM client with tension for exploration, whereas the cadences offer nurturance. With all of the changes so far in K331, Mozart has yet to change

the tessitura of the melody (it travels between "A" above middle "C" and the "A" which is an octave above that), the tonality of A major, or the tempo marking: Andante Grazioso.

### *K311 Variation III*

Variation III departs from the tonality of A Major for the first (and last) time. The melody and accompaniment move in an eerie, rhythmic unison. The tessitura of the melody more than doubles. What was formerly the narrow range of one octave is now two octaves. The melody has become sinuous. Mozart makes use of chromatic alterations to eliminate the gentle leaps of the melody. In its original presentation of the Theme, the melody abounds with leaps of thirds and fourths. These were maintained in Variation I and II; though in II they were sometimes obscured by the flashing thirty-second notes. In Variation III however, leaps and rhythmic diversity have all but disappeared.

Besides the change in modality from A major to A minor, the most striking aspect of Variation III is the rhythmic uniformity. The melody of the Theme was rhythmically diverse. Variation I contained an interesting, hiccuping rhythm, a passage of solid eighth notes with an accompaniment twice as fast beneath, and more. Variation II was rhythmically most complex, placing quadruplets against triplets, and varying forms of rhythmic ornamentation. Yet, in Variation III, melody and accompaniment move in lockstep in sixteenth notes almost without relief. The child (the melody) of Variation III seems to have developed its locomotor skills. Now he travels further and more smoothly than in previous variations. The melody in Variation III returns only once, briefly, for "refueling" with the original symbiotic Theme. This reveals the profile of a child who is able to master the tension of being away from the mother for longer periods of time, with minimal "refueling." Rather than returning to the original Theme as in previous variations, the mother-child profile of this variation is characterized by a more sophisticated refueling through its rhythmic unison of mother and child: in each step the melody is independent and self-absorbed, yet it has the unison rhythmic support of the accompaniment underneath it. The mother is still home base where the child returns in times of need.

### *K331 Variation IV*

For the first time in K331 Mozart retreats. Variation IV's melody has regressed even beyond the simplicity of the original Theme. In Variation III Mozart altered the melody into primarily stepwise motion, yet created a progressive development through the introduction of chromatic alterations and the expansion of the tessitura. Also, though the melody was presented primarily in stepwise fashion, there still was retained the occasional leap. In Variation IV, measures 1-8 contain nothing but stepwise motion, and Mozart has withdrawn all chromatic alteration. In addition, he has compressed the melody's tessitura into barely more than half an octave. Rhythm has disappeared entirely to be replaced by a perpetual, undulating motion. The left hand is used to point out the bass and, almost irritatingly, to double the melody. It seems to mock it. At the end of measure 4, Mozart trivializes the appoggiatura motive introduced in Variation I and developed in Variation II. Now, the appoggiatura is nothing more than a childish, mocking salute. It does not even appear within the melody as an ornamentation of the theme, but rather as an unintegrated punctuation in the cadence.

In measures 1-8 there are no chromatically altered notes but for the "thumb-to-the-nose" gesture in measure 4. With the exception of two beats in measure 7 the harmony is simply: I and V in root position, simpler even, in these eight measures than K331's Theme. In measures 9-12 there is a brief respite from the regression of Variation IV. The harmony is still simplistic, but there is rhythmic diversity and melodic development. This ends in measure 12 with the return of the Theme for the cadence. Measures 13-18 are, once again, in the same regressive spirit as measures 1-8: stepwise, diatonic motion, with a monotonously undulating rhythm.

Psychologically, the music of this movement seems to be in denial of its development which has taken place gradually during the previous variations. The growth and independence which were woven into the fabric of the musical material are gone. In each previous variation the mother-child dyad matured. The mother provided energy for the child to grow, and the child gained his independence from her. The musical elements expanded and diversified. But the child of Variation IV seems to have developed separation anxiety and returned to his mother's arms. There, the musical elements have become simplified: tonal leaps are practically nonexistent, the range is compressed, and all dissonance is withdrawn. Even the appoggiatura is thrown outside its melody, as the mother and child return to a more symbiotic relationship. Interestingly, this kind of emotional refueling is characteristic of the developing mother-child dyad, and serves to re-energize the child to continue his process of separation from the mother.

After Variation IV, the musical material of the Theme continues to develop through not only the next two variations, but into the sonata's later movements, as well. In these first variations, Mozart has provided different examples of the development of musical material from one theme. For purposes of this article the theme and four variations have been depicted separately, each constituting an example of a musical space, described in terms of the mother-child dyad.

## **Conclusion**

By describing the manner in which musical material develops during a piece of music, the GIM therapist may become conscious of the elements of holding and stimulation inherent in the form of the music. It would be wrong to assume that this, or that any, description could capture a "correct" musical or psychological interpretation of Mozart's Theme and Variations. On the surface, this movement is extremely simple; an eighteen measure theme and six short variations. Yet, it is evident that no single overriding label can describe this movement from K331 in any meaningful way. If such a relatively simple composition shows such complex emotional diversity, would it not be folly to assume that classical music of greater length and complexity than Mozart's K331 could possibly be defined by a single meaning, emotion, or specific psychological issue?

Our clients are no less complex than classical music. I am not suggesting that particular music be identified with particular stages of the separation-individuation process. This type of labeling would be no more productive than the pigeon-holing that takes place when a medical model psychiatrist labels a client with a DSM diagnosis and prescribes a particular medication for his symptoms. Each GIM session must be oriented to the individual client; and further, to the client on that particular day. Prescriptive matching is not an effective tool for choosing classical music. It is for this reason that I have referred only briefly to particular stages of the separation-individuation process, rather than clearly identifying them. Nor am I advocating the use of a descriptive style which identifies music as corresponding to a particular mother-dyad profile. This is as nugatory as labeling a piece of music as "sad," which then inevitably leads to prescribing it as treatment for a depressed person. As GIM therapists we must respect the complex nature of psychological and musical processes, as well as the unique nature of our clients and of each piece of classical music. We have a responsibility to our clients to make musical choices which are effective for their therapeutic process. The GIM therapist may gain

conscious awareness of the elements of holding and stimulation inherent in the musical space created by developing his or her own descriptive method. There is no "right" piece of music for a GIM session, and no prescriptive method for choosing it. But we must consciously provide a "good-enough" musical space for each GIM client in each session; a musical space that contains enough, but not too much, nurturance and stimulation. By using the strong parallels inherent in musical and psychological development it is possible to facilitate the conscious choice of music for our GIM clients' healthy emotional development.

### References

- Blake, R. & Bishop, S. (1995) The Bonny method of guided imagery and music in the treatment of post-traumatic stress disorder (PTSD) in the adult psychiatric setting. Music Therapy Perspectives, 12(2), 125-129.
- Bonny, H.L. (1980). GIM therapy, past present and future implications. Salina, KS: The Bonny Foundation.
- Goldberg, F. (1994). The bonny method of guided imagery and music (GIM) as individual and group treatment in a short-term acute psychiatric hospital. Journal of the American Association for Music and Imagery, 3, 19-33.
- Kenny, C. (1989). The field of play: A guide for the theory and practice of music therapy. Atascadero, CA: Ridgeview Publishing Company.
- Mahler, M.S., Pine, F., & Bergman, A. (1975). The psychological birth of the human infant. New York: Basic Books, Inc.
- Mozart, W.A. Sonata in A major, Koechel 331. In Sonatas and Three Fantasias for Piano, Volume II (pp. 125-131). New York: Edwin F. Kalmus Publishing Company.
- Nolan, P. (1989). Music therapy improvisation techniques with bulimic patients. In Hornyak, L.M., Baker, E.K. (1989). Experiential Therapies for Eating Disorders. New York, NY: Guilford Press.
- Summer, L. (1992). Music: The aesthetic elixir. Journal of the Association for Music and Imagery, 1, 43-53.
- Summer, L. (1995) Considering classical music for use in psychiatric music therapy. Music Therapy Perspectives, 12(2), 130-133.

Winnicott, D.W. (1969). The theory of the parent-infant relationship. International Journal of Psycho-analysis, 50, 711-717.

Page 48 | Summer

## APPENDIX: MOZART, SONATE

## Sonate

W. A. Mozart.  
Köchel-Verz. Nr. 332.

11. *Andante grazioso.*

11. *Andante grazioso.*

Var. I.



Handwritten musical score for piano, featuring six systems of music in G major. The score includes dynamic markings (*p*, *f*), articulation (trills), and a section labeled "Var. II.".

The first system consists of four measures. The right hand plays a continuous eighth-note pattern, while the left hand provides a harmonic accompaniment. Dynamic markings *p* and *f* are present.

The second system consists of three measures, continuing the eighth-note pattern in the right hand.

The third system consists of three measures, featuring a trill in the right hand and a strong *f* dynamic.

The fourth system is labeled "Var. II." and consists of two measures. It features a trill in the right hand and a *p* dynamic in the left hand.

The fifth system consists of two measures, continuing the trill in the right hand.

The sixth system consists of two measures, featuring a strong *f* dynamic in the right hand.



The image displays a page of handwritten musical notation, likely a piano score, consisting of six systems of staves. Each system contains a treble staff and a bass staff, both in the key of D major (two sharps). The notation includes various musical elements such as notes, rests, and dynamic markings.

- System 1:** Treble staff features a series of eighth notes and quarter notes. Bass staff has a few notes and rests.
- System 2:** Treble staff begins with a *p* (piano) dynamic marking. It includes a series of eighth notes and quarter notes. Bass staff has a continuous eighth-note accompaniment.
- System 3:** Treble staff includes a *cresc.* (crescendo) marking. Bass staff includes a *f* (forte) marking and a *p* (piano) marking.
- System 4:** Treble staff features a series of eighth notes and quarter notes. Bass staff has a continuous eighth-note accompaniment.
- System 5:** Treble staff features a series of eighth notes and quarter notes. Bass staff has a continuous eighth-note accompaniment.
- System 6:** Treble staff features a series of eighth notes and quarter notes. Bass staff has a continuous eighth-note accompaniment.

Var. III.

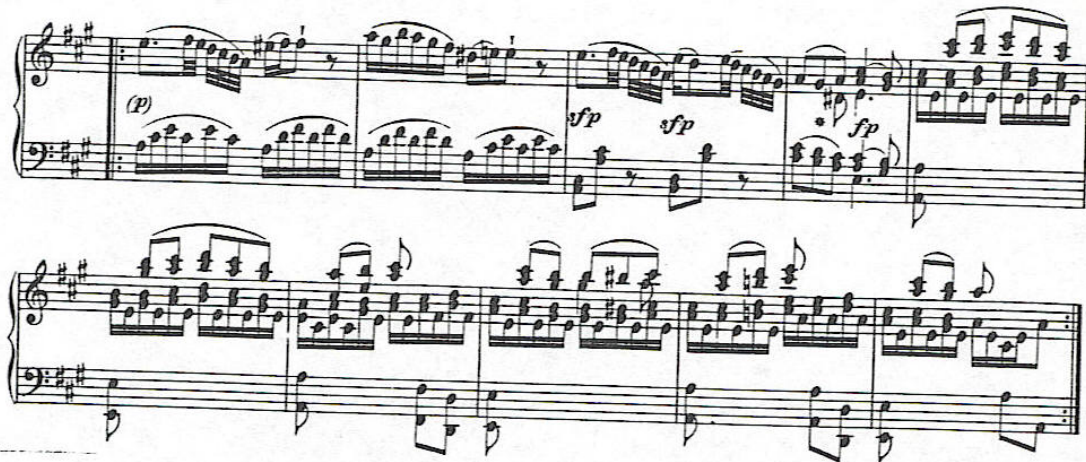
Var. IV.

(L.H.)

The image displays two musical variations, Var. III and Var. IV, each consisting of two systems of piano and forte dynamics. Var. III is in 6/8 time and features a complex, flowing melody in the right hand with a steady eighth-note accompaniment in the left hand. Var. IV is in 6/8 time and features a more rhythmic, accented melody in the right hand with a simpler accompaniment in the left hand. The score is written for piano and includes dynamic markings such as *p* (piano) and *f* (forte).



129



#### 1.4. Transition to Publication 4

The overarching intent of *The Pure Music Transference in Guided Imagery and Music* [Chapter Nineteen in In K. Bruscia (Ed.), *The dynamics of music psychotherapy*. Gilsum, NH: Barcelona Publishers, 1998] is the deeper appreciation of the two main components of the GIM process: music and imagery. The article's three themes are: 1) defining therapeutic transference and subsequently defining music transference, 2) presenting the necessity for understanding one's own music transference reactions as a prerequisite for clinical practice, and 3) describing the centrality of imagery as an expression of the music transference.

First the article proffers an object-relations definition of transference as a form of projection, followed by an explanation of how, in psychodynamic psychotherapy, the client's transference projections are received by the therapist. Next, the article outlines the simple concept of a transference with music and the therapeutic advantages of a "pure music transference," as compared to transference with a therapist. The idea of the pure music transference is then complicated by the introduction of the triadic therapeutic relationship in music therapy (client, music, and therapist) and the concept of both therapist and music as possible transferential objects. The article then presents the idea of a split transference that is diagrammed as a transference continuum in which opposite ends of the continuum are labeled as "therapist" and "music." The article clarifies that although it is typical for a GIM client to travel along the whole continuum, the preferred location for the client is as close as possible to the pure music transference end of the continuum.

Before any further explication of the advantages of the pure music transference, I share my personal relationship with music and describe how it served the function of an understanding parent for me in my childhood. This illustrates that the development of a pure music transference is a naturally occurring phenomenon and suggests that GIM therapists should develop a practice of examining their own, already established, personal transference relationship with music as a pre-requisite for understanding how to utilize music in GIM.

Subsequently, the article describes the relationship between music and imagery because, in GIM, it is through the particular balance between these two therapeutic tools that transformation occurs.

Although music is considered the primary therapeutic tool in GIM, the music itself is not “acted upon” in any way; nor do the client or therapist produce any music. It is the language of imagery that holds a place of primacy as the mode of expression. Feelings and thoughts are projected *onto* the music and this is expressed immediately through images. Therefore, images are the vessels for the client’s reactions to the music, including, and especially, the transference relationship to the music. These theoretical concepts are then applied to each component of the GIM session through a description of a client’s case material. The clinical example shows how the client’s (Gina’s) transference is stimulated, worked through, and resolved through the GIM process.

The topic of this book chapter originated from my observations while supervising GIM trainees who were struggling to find a balance between imagery and music, often overemphasizing imagery. This chapter was a response to my questions about how to provide effective supervision strategies that teach students to utilize music as the primary therapist. It presents the foundational concept of the present study’s clinical protocol: the use of music as the primary therapist in GIM practice.

---

**SUMMER, L. (1998). THE PURE MUSIC TRANSFERENCE IN GUIDED IMAGERY AND MUSIC (GIM) IN K. BRUSCIA (ED.), THE DYNAMICS OF MUSIC PSYCHOTHERAPY. GILSUM, NH: BARCELONA PUBLISHERS**

In Mozart's opera, *The Magic Flute*, Tamino must complete a rite of passage in order to enter into manhood. First he is met by Pamina. She gives him a flute and sings:

In me your trust confide  
For love shall be my guide....  
Now take the magic flute and play;  
Its golden tones protect our way.

Led by the music from his magic flute, and supported by Pamina, Tamino passes through a trial of fire and water blindfolded. When his rite of passage is completed (in most productions) he gives the flute away. Tamino's words illustrate his journey:

The fire's flames we have transcended.  
The danger we have firm withstood,  
And still by magic tones defended,  
We penetrate the water's flood.

Tamino's rite of passage is akin to the experience of the Guided Imagery and Music (GIM) client who, with eyes closed, journeys through emotional trials on the path to health.

Unlike the client of verbal therapy who is accompanied by his therapist, the GIM client is guided not by the therapist's words, but by the sounds of flutes and horns and strings. In GIM, the configuration of the therapeutic triad (the client, therapist, and music) is akin to the Mozart's configuration of elements in this scene from *The Magic Flute*. Though the therapist plays an essential role in the GIM client's journey, the music, and not the human guide is the primary instrument of transformation. Likewise, in GIM it is the music, not the therapist, which is the primary therapeutic agent, and as such, becomes the central object of the client's transference relationship. Though heretofore transference in GIM has not garnered much commentary, there is a need to address this complex issue. I have limited myself to what I consider the most essential questions in defining transference in GIM: the function of classical music in forming the transference, and the unique nature of the pure music transference. Before proceeding, it is necessary to explore definitions of both GIM and transference.

In the early 1970's when music therapy was a primarily behavioral field, Helen Bonny was a pioneer in exploring a psychodynamic and transpersonal approach in music therapy. Through her participation in experimental research with LSD, Bonny became aware of the power of combining an altered state of consciousness with music to evoke dynamic internal experiences of a personal and transpersonal nature. She developed the GIM technique which typically consists of four main components: a verbal prelude, an induction, music/imagery synergy, and a postlude. Although there are many music therapy techniques which utilize music and imagery, and many music and imagery techniques which utilize these same four session components, the defining feature of the Bonny Method of GIM is its use of evocative classical music programs as the central transformational agent of the therapeutic process which takes place within a psychodynamic/transpersonal theoretical framework.

### **An Object-Relations Definition of Transference**

When parents are not able to adopt a "good-enough" nurturing strategy for their child, deficits in the child's ego structure occur (Winnicott, 1971). Fortunately, therapy can provide a corrective nurturing experience to re-structure the child or adult's ego. When an adult client develops a relationship with a therapist, the therapist can fulfill the deficits in nurturing which were missing from the client's childhood. The therapist's task is to re-enact a healthy, primary relationship, and give the client good-enough nurturing this time around.

When the therapist/client relationship is established, the client projects past, inadequate

nurturing experiences directly onto the therapist. As part of the therapeutic process, the therapist encourages this transfer of elements of old, nuclear experiences onto herself. The therapist becomes a container for these fragments of the transference and, over time, these fragments coalesce into a full transference reaction. The client's ego is repaired when he re-experiences the memories of his past, inadequate nurturing in its full emotional resonance, and comes to understand that his past experiences are actually intruding upon his present reactions to the therapist (Greenacre, 1990). The establishing, experiencing and working through of the transference relationship with the therapist is considered to be the main tool of psychoanalytic psychotherapy.

### **Building a Definition of Transference in GIM**

The traditional definitions of transference within a verbal psychotherapy setting, as noted by Bruscia (1995a) do not take into account transferences that "can arise when nonverbal, experiential methods of therapy are employed, and when objects such as music, art, and dance forms are available to both evoke and receive transferences" (p. 11). In all music therapy techniques there is a triadic, not a dyadic therapeutic relationship consisting of the client, music, and therapist. This allows for a variety of transference relationships to develop, with myriad possibilities for how the transference is evoked, received and worked through.

The current literature on GIM has very sparse documentation on how even the basic types of transference are manifested and developed. This lacunae needs to be remedied in order to improve the understanding and application of GIM. GIM, still being in its infancy as a therapeutic technique cannot rely upon existing descriptions of transference in the psychotherapeutic or music therapy literature because of its uniqueness, and because of the distinct nature of the transferences that are developed in the process.

GIM is unique in two very significant ways. First, it elevates classical music to the position of primary therapist in the triadic therapeutic relationship; it is always the primary mover of the therapeutic process. From the very beginning of the therapeutic process, the therapist presents the music to the client in a manner that allows the client's primary relationship to develop towards the music. In GIM, the music is placed centrally between the client and therapist so that the music can nurture the client and thereby serve as the object for his transference. In verbal psychotherapy, only the therapist is available for such nurturing and transference. In short, the structure of the GIM session and the entire approach to guiding are

geared towards establishing the primacy of the client/music relationship, and thereby increasing the possibility that music will play the most significant role in the transference.

The second unique feature is that in GIM, the client creates images while listening to the music. This creates a unique opportunity for the client to use the imagery as a means of expressing and working through any transferences that have been evoked by the music. In short, the GIM method relies upon the music to evoke transferences, and encourages the client to use imagery to work through them.

When put together, these two distinct features of GIM suggest that, despite the variety of transferences that can arise in GIM, by its very nature, GIM as designed by Bonny (1989) fosters the development and exploration of the “pure music transference,” as a uniquely effective tool in the therapeutic process.

The pure music transference in GIM is defined as a therapeutic relationship in which the music serves the essential therapeutic functions in the therapeutic process, including serving as the primary transference relationship; while the therapist's role is secondary: to establish and further the client's relationship with music while serving minimal therapeutic functions for the client.

In reality, few clients arrive for therapy ready to form a pure transference with classical music (an exception being GIM students and musicians who partake in GIM therapy) and since the therapeutic process develops based upon the needs of the client, the GIM process evolves differently from client to client; as well as differently from week to week with the same client. A client who, initially, is not a candidate for a strong music transference may, through the therapeutic process be ready after only a few sessions. However, many clients are not appropriate candidates for a strong transference with music at all.

The practice of GIM varies from clinician to clinician, and different styles of working in GIM have developed, and have been encouraged, since its inception. Not only do GIM clinicians practice GIM differently, some clinicians utilize other techniques within the therapeutic process, including but not limited to music/imagery, music/art, music/movement, and music improvisation. Considering this diversity, it is important to place the concept of the pure music transference in perspective with other types of general transferences that occur in GIM.

The wide variety of practice in GIM can be illustrated by a linear continuum, placing the theoretical extreme of the pure music transference at the left end of the continuum and an equally



extreme theoretical "pure therapist transference" on the right.

---

PURE MUSIC TRANSFERENCE	SPLIT TRANSFERENCE	PURE THERAPIST TRANSFERENCE
-------------------------------	-----------------------	-----------------------------------

---

The pure therapist transference in GIM is the opposite of the pure music transference. It is a therapeutic relationship in which the therapist serves the essential therapeutic functions in the therapeutic process, including being the primary object of the transference; and the music is utilized to support the establishment and development of the client/therapist relationship.

Using this continuum we can examine the configurations of the triadic relationship in GIM practice, and the myriad possibilities of the "split transference" (Goldberg, 1991) that arise when clinicians modify the GIM method to serve particular clientele. GIM practice can be found anywhere on this transference continuum. Clinical practice with various clients, and even with one client moves in both directions along this continuum.

My own clinical practice in GIM varies widely on the transference continuum. GIM students partaking in GIM therapy are the clients who are usually ready for a pure music transference since they are most often musicians and therefore come to therapy with an already developed primary relationship with music. A contrasting situation is found in my clinical work that takes place within a private practice with verbal therapists. In this practice, clients are usually referred to me for music psychotherapy after several months of intensive verbal, systems-oriented, psychotherapy. Many of these clients are not ready to immediately experience transference reactions to music because they have become used to experiencing transference reactions to their therapist in verbal therapy. Therefore time is taken to facilitate a gradual transition to experiencing transference with music, rather than with the therapist (and also to facilitate a smooth transition from their verbal therapist to me.) In this practice, a split transference between the music and the therapist, especially at the beginning of therapy, is more usual. However, no matter how the split transference evolves, I consider working *towards the direction* of a pure music transference to be the most effective way to work in GIM in order to utilize the advantages that the music transference offers. Because of the benefits to the client and to the therapeutic process, even when my client is not an appropriate candidate for a pure music transference I still work to develop the strongest, purest music transference possible.

Given the myriad ways of conceptualizing and shaping transference relationships in GIM, and my own belief in the primacy of the music as therapeutic agent, this chapter will deal only with the pure music transference, its clinical advantages and its unique suitability for GIM practice. What follows then is a description and clinical examples of the basic parental transference relationship with music that naturally develops in GIM. I will not be addressing types of transference that can occur on the transference continuum above (a wide variety of split transferences and the pure therapist transference). Nor will I address types of transference that are more specific than a general parental transference, such as mother or father transferences, preoedipal or oedipal transference, positive or negative transference (Bruscia, 1995a, 1995b). This does not mean that these types of transferences do not occur in GIM, only that my focus in this chapter is restricted to the concept of transference with music in general, not the quality or variety of transference possibilities. Also beyond the scope of this chapter is the investigation of the music transferences of musicians, music therapists, and GIM trainees. (The strength of these clients' already established music transference results in a therapeutic process which involves working through the transference directly with the music rather than indirectly with imagery.)

Before examining the pure music transference in GIM, it is important for the reader to understand why it is of particular interest to me, and why it plays so significantly in my conception and practice of GIM.

### **Personal Origins for the Pure Music Transference**

My understanding about music transferences has its origins in the personal relationship that I developed with music when I was an adolescent. As an adolescent, I became disillusioned with the values and the life view imposed upon me by my parents. I broke their rules and tried to discover who I really was, instead of just being my parent's daughter. Each day for me was filled with conflicts and emotional risks, searching for my own identity. My parents, I felt, had no real understanding of me as a person separate from their expectations. After school was my time to practice piano, and I played Brahms, Beethoven, and Chopin, sometimes for several hours. In the music I felt cared for, "understood." It seemed as though the music heard my feelings. When I was subtly sad, the music captured it subtly; when I was angry, the music reflected the intensity of my feeling. The music could also contain my multifaceted feelings so that I could experience sadness, anger, and joy simultaneously. I was never too subtle, too intense, or too complex for music.

However, the music served more than merely a containing, reflective function for me. The movement of the music helped me to move through the feelings that seemed stuck inside me. I learned to bring my diffuse feelings to the piano; to allow the music to give shape to them; and then, subsequently if I "let go" to the music, it could deepen, expand, and transform my feelings, my consciousness. I learned that as a piece of music built in power and complexity, it could stimulate and transform my conflictual internal experiences.

It was my daily musical experiences, practicing at the piano, that taught me about the nurturing functions of music. I learned to take in the supportive and stimulative nurturance which was implicit in the musical experience. The music served as a therapeutic "good-enough" parent for me. I established a strong, dependent, transference relationship with classical music while, at the same time, gaining my independence from my parents as an adolescent. This had a distinct advantage for me as an adolescent: since music was not my real mother or father, my relationship with it allowed me to experience good-enough nurturing while simultaneously separating from my real parents.

My transference with music is simple because it only involves the interaction between me and music. In GIM, there cannot be such a pure music transference as the musician's transference, since the therapeutic relationship is a triadic one that consists of the music, the GIM therapist, and the client. The music and the GIM therapist are considered the co-therapists of the therapeutic process. Despite the complexity of the music, client, and therapist all interacting, the client/music relationship is always the primary relationship because the music always functions as the primary agent for therapeutic change in the client (Bonny, 1989).

### **Advantages of a Establishing a Pure Music Transference in GIM**

The ultimate goal of the transference relationship is the independence of the client from the therapist, but this independence is only achieved gradually in the resolution of the transference at the end of the therapeutic process. The first step of the transference requires the client to establish an initially strong, dependent attachment to the therapist. The difficulty with this dependence is that the client is likely to attribute any progress that he makes in therapy as originating with the therapist. When the music, rather than the therapist, serves as the object of the transference relationship, the client can have a more independent, separate status from the therapist from the beginning of the therapeutic process. This separation means that the client is more likely to attribute the gains he has made in therapy to himself, or to his relationship with

the music. Although the separation from the therapist is in part illusory because the music, which is chosen by the therapist, is an extension of the therapist herself; nevertheless, the client still gains a modicum of independence from the therapist.

Another advantage of using music as the transferential object is music's neutrality. In verbal psychotherapy, the therapist must take a stance of neutrality in order to foster the client's projections onto her. Neutrality creates an environment for transference reactions to occur. Classical music can be even more neutral than the most neutral therapist. Music, when it has no words, does not represent any specific, objective characteristics. The music is ambiguous; it is not objectively male or female, stern or allowing. The GIM method "can motivate a less personally oriented transference and glue its easing magic onto a musical composition, to be channeled and ingrained in the psyche at fundamental levels" (Bonny, 1988, p. ix). Although there is little in the music therapy literature about music serving as a the object of transference, there is documentation from sources in art therapy which delineate the advantages of using an art form as a transferential object (*The Arts in Psychotherapy* Special Issue: Transference/Countertransference and the Creative Arts Therapies, 1992; Dalley, 1987; Wood, 1984).

Another advantage of working with a pure music transference is that the GIM therapist does not need to take all of the transference projections upon herself. In verbal therapy, the therapist serves as a container throughout the therapeutic process, receiving all of the client's transference reactions. The client's projections necessarily stir up countertransference reactions within the therapist. With a music transference the therapist gains a measure of emotional freedom from the client's direct projections. (This does not mean that GIM therapists are free from countertransference reactions.)

Perhaps the biggest advantage in the GIM pure music transference stems from the relative ease with which classical music can contain several experiences simultaneously. In verbal therapy the therapist must contain all of the transference reactions over time so that the client can piece together the disparate parts of the transference. The key to the use of classical music in the transference is that its complex, multilevelled nature allows the client a fuller transference experience by stimulating several facets of an experience simultaneously. The GIM client can experience several disparate feelings about a situation, or several fragments of the past in relation to each other, simultaneously. This phenomena is similar to the experience of transference in verbal group therapy wherein the

contents of a group member's transference is split up and projected upon members of the therapy group who are all present, and interacting, simultaneously (Agazarian & Peters, 1981).

In addition, the complexity of classical music facilitates the working through of the transference by actively catalyzing the interaction of the transference fragments (in the form of images). In each piece of classical music, themes are modified, rearranged, and placed together in different patterns. The client hears the musical material and the manner in which it is developed in relation to internal emotional experiences. The simultaneous presentation of many musical themes serves as a catalyst for the client to experience various fragments of the transference simultaneously. The interaction of musical themes as they are placed together in different patterns serves as a model for the client to integrate fragments of internal experiences which have heretofore been separate.

### **The Client/Therapist Relationship**

In GIM the therapist's role is a non-directive one; with good reason, GIM therapists sometimes call themselves "GIM facilitators." The therapist has the following tasks within the therapeutic process of GIM: assessing the client; setting goals in conjunction with the client; choosing music for the client; helping to establish and develop the strongest relationship possible between the client and the music; and helping the client work with imagery evoked by the music during and after the music experience. In all of these tasks, the therapist gives the client as much independence as possible through a non-directive approach.

An important function played by the therapist in the GIM process is that of modeling values. Since the therapeutic process takes place within the aesthetic domain of classical music the therapist helps the client to acquire new values which include the aesthetic, expressive, and creative aspects of life. With the therapist as a model, the client can more easily value these qualities within himself. In addition, the GIM therapist models a respect for the complexity of feelings and other modes of inner experiences. These qualities serve the entirety of the therapeutic process, as well as the client himself in his life.

### **The Therapist/Music Relationship**

In GIM the client/music relationship is primary. The therapist places trust in the ability of the music to serve the essential functions of therapy. In GIM training, this is known as, "Getting out of the way of the music."

The nature of the GIM therapist's personal transference relationship to classical music is

perhaps the most important determining factor in deciding upon the functions that music plays in the practice of GIM. The therapist's ability to help the client establish a strong transference relationship with classical music is dependent upon the therapist's own transference relationship with classical music. The therapist's strong and trusting relationship serves as a model for the client, allowing him to develop his own primary, transferential relationship with the music. Therefore, the GIM therapist must develop and understand his/her own personal relationship with music (Summer, 1994).

### **The Function of Imagery in GIM**

In music therapy when an individual client and therapist improvise together (without utilizing imagery) the music created is the product of the therapeutic relationship between the client and therapist and is considered to be a transitional object (Nolan, 1989; Goldberg, 1995). When the client and therapist work directly upon the evolution of their improvised music, then it is in the music that the therapeutic process occurs, and where transference is established and expressed.

In GIM, the client and therapist do not produce music because, of course, the classical music used has already been composed. In GIM, the client's imagery, not the music, is the product of the therapeutic relationship. In GIM, the imagery, not the music, serves the function of the transitional object. This is an important distinction in regard transference, because in the improvisation process described above the music evokes the transference, and then the client's transference reaction is expressed directly into the music. Therefore, the music both evokes and expresses the transference relationship. In GIM the transference is experienced in relation to the music; then expressed and worked through indirectly, in the imagery. The client and therapist do not create the music; rather, they work with the evolution of the imagery experience which has been generated through the relationship to the music. (Although transferences in GIM can be worked through by directly relating to the music - especially in working with musician clients - I am focusing upon the most common function of imagery in the GIM technique as developed by Bonny.) In GIM, the images are the vessels for the expression of the transference relationship. Images are the primary containers of internal experience and they divide the client's internal material, including transference reactions, into manageable, meaningful units.

### **Clinical Example of the Pure Music Transference**

#### *Background and the Beginning of the GIM Process*

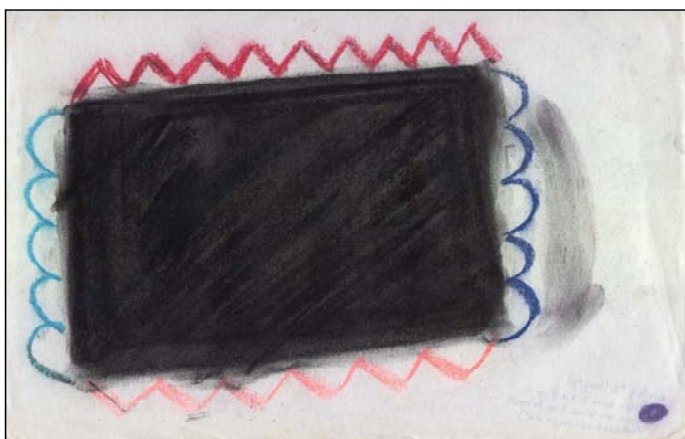
Gina (not her real name) is a forty-five year old female client seen in verbal therapy (with a psychotherapist) for four months and music psychotherapy (with me) for three months. Gina had lived, for the past ten years with her husband, in the Caribbean where they worked in business together on their successful beachfront retail store. Gina's life revolved around her work with David during the day, and drinking with David and their friends in the evenings. However, over a period of several years both their marriage and their business partnership rapidly declined, and there was little to no attempt by either to stop the progression. David gradually retreated from his business responsibilities, using alcohol during the day and evenings; Gina took up the slack for him, working overtime to keep their business going, using alcohol in the evenings to "deal with her stress." Gina's friends recommended that she seek therapy, which she did.

She came to therapy seeking relief from "stress" and to deal with her failing marriage. Within several sessions, with the help of her therapist, she identified her most serious underlying problem - addiction to alcohol, and she began the difficult road to sobriety. She began attending Alcoholic Anonymous (AA) meetings daily and 1-2 therapy sessions per week and she made excellent progress in both. As she assessed her situation she asked herself, "Is this all I want from life?" "Is this enough?" Her answer, "No," came easily enough. But, after four months of sobriety and therapy, Gina was encountering overwhelming anxiety over the possibility of having to make a decision to change her life and became resistant to continuing therapy. Although she reported feeling solid in her sobriety, she reported feeling depressed and lifeless almost every day. Having utilized alcohol throughout her adult life as a defense and a numbing agent to take care of any difficult feelings she encountered within herself, she now felt unable to address her depression.

Her therapist referred her for GIM at this point for several reasons. First, the therapist knew that GIM was more direct than verbal therapy in dealing with surfacing depressive symptoms. Second, she knew that GIM would expedite the internal, reconstructive work that Gina needed to accomplish in order to hold on to her sobriety, and the therapeutic gains she had made thus far. The therapist determined that Gina was an excellent candidate for GIM because she had a strong ego, she was solid in her sobriety, and she had already established a strong relationship with music throughout her childhood and adult life.

After an initial meeting with Gina's therapist and a meeting between the three of us to

establish therapeutic goals and a timetable for our work, Gina came for her first therapy session with me. Gina reported, "My life is filled only with drudgery. I am miserable every day." Although her main enjoyment in life had been her work and socializing with her friends, she now "hated everything and everyone," especially her husband. I asked Gina to express the state she was in through art and gave her a piece of paper with a circle drawn on it. She began her drawing, (Plate #1) by drawing over the circle with a rectangle, and filling the shape with black, using firm, heavy strokes. Then she placed several bright colors on the four outside borders of the square, and ended by drawing a small purple dot in the bottom corner.



### **Plate 1**

Solid black rectangle bordered by red on the top, pink on the bottom, light blue on the left, and dark blue on the right; purple dot in the corner

Throughout the drawing, Gina held back tears and did not speak, although she made eye contact with me throughout her work. When she finished drawing she explained that the solid black rectangle was the hate inside her, and that the outside of the rectangle was colorfully decorated "so that others don't see" the hate. Gina finally became tearful when discussing the purple dot in her drawing. She related to its isolation, the way it was "curled up in the corner." She felt that it was a true representation of how small and overwhelmed she felt, and stated that its size in comparison to the other parts of the drawing reflected her inability to cope with her life.

Looking at her drawing, Gina was able to see that her current strategy for managing feelings was inadequate. Clearly, Gina was split into three parts and there was a significant



difference between her internal world and the persona which she showed the external world. In addition, she could see that neither of the two small parts were adequate to take care of the internal turmoil, the "hate," as she described it, that had built up inside her -- the colored border was too thin, and the purple dot was too small and distant. Gina's visual representation of her current internal structure served as the inspiration for her to find a workable strategy to manage the feelings that were surfacing and as a reference point for her throughout the therapeutic process.

The first place that Gina and I looked for a coping strategy was in her own past. Gina was easily able to identify her childhood pattern of coping with emotions: when she was punished by her mother (she was punished often and severely) she would run to the center of a large overgrown field next to her house to cry. This field became her crying place, a retreat from her family, and an escape from the extreme restrictions she experienced from her mother. In our session, she initially called her behavior "escapist." However, she compared her childhood and adult defenses and found that although she isolated herself (like the purple dot) as both a child and adult, as a child she was able to express her feelings and after her "cries in the field" she had felt significant relief. She was able to reframe this childhood experience as a healthy one: "It's amazing that I could express my feelings on my own when I was so young." Whereas initially she felt hopeless about ever managing her feelings, she gained some confidence by acknowledging her inner strength as a child and she agreed to utilize her childhood strategy over the next few days: she would find a time and place to cry - to experience a congruency, rather than a split, between her internal and external world.

Because Gina was a recovering alcoholic, it was important for me to help her identify the role that alcohol had played in solidifying her tendency to cover over her internal experiences, keeping them hidden and split off from the external world and to help her replace her current defensive strategy - drinking - with a new defensive strategy taken from her (pre-alcohol) childhood. Neither Gina nor I wanted to threaten her continued sobriety as she addressed therapeutic issues.

This first session did not utilize music. It served as a segue from Gina's sessions with her primary therapist to her work with me, and introduced her to one component of the GIM process: the use of symbolic imagery. In this session I assessed her ability to project internal experiences into images and to identify with them because this process of projective identification with

imagery is essential for the successful use of imagery as a vehicle for the expression of internal material, including the transference relationship.

### *Establishing the Pure Music Transference*

Working with music as co-therapist in a session is akin to two therapists working as a team with a client. When two therapists work together, mutual decisions are made regarding how each therapist functions in the therapeutic process. The essential therapeutic functions are usually divided between the therapists in a fluid manner based upon the client's response to each therapist and upon her needs within the therapeutic process over time. In GIM, because co-therapy is accomplished between the therapist and the music, these decisions cannot be mutual since the music is not a human being. Obviously, the music cannot come forward into the position of the primary therapist on its own; it must be intentionally placed there by the GIM therapist. In Mozart's *Magic Flute*, Pamina does not simply give Tamino his magic flute, she presents it to him and describes its function. She explains that she will be present for his rite of passage, but that it is the magic flute's music that will lead and protect him throughout his journey. In GIM, because music is not present in every part of the session, it is crucial that the therapist, with careful and intentional preparation, set the stage in the prelude of each session for the music to play the lead role in the transference.

### *The GIM Prelude and the Timing of the Music Experience*

Gina's second session illustrates how strategies used in the GIM prelude promote the pure music transference even before any music occurs in the session. To begin, Gina reported feeling that she had regained some of the confidence she had felt in herself as a child in her last session. For several days in a row, she found a time and place to cry in solitude. This process yielded two outcomes: first, it intensified her feelings which were uncomfortable for her; second, she felt some hope for the first time about finding a way out of her depressed state.

The purpose of the GIM prelude is to allow the client's tensions/issues to surface and be expressed verbally. I wanted to help Gina develop a relationship with the feelings that were surfacing, rather than avoid them, so I asked her to describe her current inner state to me as fully as she could. She explained, "I feel despondent, tired, blank; I have no thoughts at all." Then with a loud sigh she said, "I feel so insignificant," and looked directly at me, waiting for a response. Although I empathized with Gina, I asked her not to seek immediate relief for her discomfort. I explained to her that if she focused upon the despondence and "took her feelings

into the music," that the music would suggest a way to work with them. I emphasized that the music was not intended to immediately assuage her feeling; but rather, to help her work with and learn more about the tiredness, the blankness, the insignificant feeling.

The strategy in the GIM prelude involves increasing the client's internal tension. This necessarily increases her vulnerability, and her susceptibility to forming a dependent attachment upon the therapist. The client is seeking relief from tension (not an increase in discomfort); hence, the timing and the manner in which tension is addressed is essential for the establishment of the pure music transference. Once the client's internal tension has been increased, rather than continue to work therapeutically within the client/therapist relationship which would encourage the transference with the therapist, the GIM therapist introduces the music experience at the peak of the client's internal tension. By doing so the therapist allows the client to work with her internal state in relationship to the music and establishes the music, rather than the therapist, as the primary therapeutic agent.

*Induction: The Altered State of Consciousness*

The purpose of the induction is to maximize the client's awareness of the internal experience. A relaxation technique focuses upon the body; and a starting image, usually taken from the prelude, serves to hold the client in the internal experience and to begin the imaging process. The induction procedure serves as a bridge upon which the tensions from the prelude can be carried into the music experience. The physical position of the client during the induction (lying down with eyes closed) is an important factor in developing the primacy of the client/music relationship over the client/therapist relationship since the client makes no eye contact with the therapist at this time.

Gina prepared for the short induction by reclining on the couch in my office with her eyes closed. I directed her to take several deep breaths to settle her body in this new position. Then I helped her to focus directly upon her internal experience to find an image. Gina reported, "The depressed feelings are all there, my body feels very heavy and tired." I asked, "Can you describe it further?" She continued: "It's grey and ugly inside; all balled up like a bean bag chair..."

*Choosing and Presenting Music for the Pure Music Transference*

***Music Serves a Holding Function***

The iso principle is used to determine the choice of music program for the GIM client. The music is chosen to match and to create an auditory mirror of the client's internal state. When

the music is reflective of the client's inner tensions, she feels "understood," and held, by the music. Bonding and trust in the therapeutic experience with music is generated over time through these matching experiences in the same way that the newborn infant develops a deep primary bond with the parents through consistent, physical holding. Although the music does not literally hold the client, the client feels embraced by the music in the same way that the newborn feels held by the parent. In the parent/child relationship a merging occurs through these holding experiences and a primary bond is created. In the case of GIM, the client becomes immersed in her musical reflection, allowing her to merge with the music, to become one with it. In this way the pure music transference is established: the early parent/child relationship is recreated and the music begins to serve what Winnicott cites as the first, and most essential, nurturing function of the parent: holding. Winnicott contends that "good-enough" holding is a necessary precursor to the child's feeling of a continuity of self over time, called a "me" experience (Winnicott, 1971).

The manner in which the music experience is presented in GIM is important because it opens the client to the functions that the music can play in relation to the internal experience. The client learns to utilize the nurturing functions inherent in the music. In GIM, the holding function of the music is especially important at the beginning of the music experience; it is the opening of the piece of music, the exposition, that serves to match the client's internal state (Summer, 1995).

### ***Music Serves a Stimulative Function***

Holding is not the only function that the music serves, nor is the music in GIM intended merely to stimulate a "me" experience. In fact, in GIM the main function of the music is a transformative one. The music is chosen in order to transform the client's consciousness beyond the current state, introducing the possibility of a new, "not-me" experience.

As a piece of classical music unfolds beyond its exposition the musical material undergoes a transformation. The elements of the musical material are dissected, spliced, and rearranged, uncovering musical possibilities inherent in the original theme. As the piece develops beyond its exposition, there is a simultaneous experiencing of the original musical material and all of its metamorphoses. Psychologically, the client experiences the familiar "me" music, along with a new "not-me" experience (Summer, 1992).

Winnicott cites the presentation of new objects, "not-me" experiences, as the second essential nurturing function of the parent (1991). "Not-me" experiences, in the form of new

objects and toys, stimulate the child to grow beyond his previous experience of himself. This expands the child's world and provides the foundation for healthy psychological growth. Whereas in the parent/child relationship the parent introduces "not-me" experiences through unfamiliar objects, in the GIM therapist/client relationship, the "not-me" experience is introduced through unfamiliar musical territory as the music develops beyond its exposition.

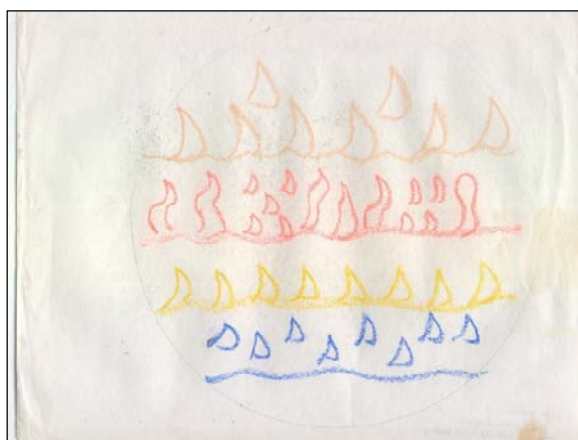
In Gina's GIM session, I chose Wagner's *Siegfried Idyll* to provide holding for her "me" experience (the feeling of despondency that was projected into the ugly, grey, rolled-up bean bag image). I asked to her to be open to the music, and to allow it to affect her internal experience - I let her know that the music might intensify the feelings, change them, or stimulate something else. These instructions were to assure the strongest possible music transference, allowing the music to serve the essential functions of holding, as well as possibly presenting Gina with a new, transformative "not-me" experience.

### ***The Music Experience***

As the *Siegfried Idyll* began, Gina described her experience to me: "My body feel like a sponge; grey, the size of a bean bag chair. The sponge is dirty and heavy. It absorbs things from the outside. It's bumpy and thick; it's so durable, it can take anything, absorb anything. It feels so lonely."

I helped Gina to create the image of the sponge, which she called "the blob," as fully as possible by activating her senses. Interventions such as "Describe its shape," "How big is it?" "Can you tell its texture?" helped Gina to develop the shape, size, texture, color, density, the sensations, feelings, and the immediate surroundings of the blob. The blob was solid through and through, filled with "dirt and guilt," and it was so heavy that it could not move an inch. As the experience intensified, Gina became fearful saying, "It has taken in so much dirt that it might burst." Encouraging her to utilize her relationship with the music, I asked, "How are you experiencing the music?" She was surprised to find that, "The music is stirring something inside the blob - there is something hidden deep inside it. Something inside it is moving!" Gina began to relate to this hidden part, working cautiously with the music to energize the trapped "something" inside the blob. It became apparent to Gina that there was some kind of creature trapped inside the blob. The creature's kicking told her that it wanted to get out, but she felt that it was not strong enough to release itself. Feeling hopeless and fearful, her initial efforts solidified the blob. She tried to aid the helpless, trapped creature, but the music condensed the

blob more and more. The music would not allow the creature its freedom. As the blob solidified so did Gina's anguish. With my support, she was able to stay with this difficult experience. As the music developed, it solidified the blob so much that it became as hard as a rock. The process of solidification continued, her feelings gained power, and finally, they were released in loud sobs. As Gina cried, the rock melted into a puddle and she felt comforted by the closing measures of the Siegfried Idyll.



## Plate 2

Rows of dancing raindrops; top row, peach; second row, fluorescent pink; third row, yellow; bottom row, blue

Next, the second movement of Beethoven's Fifth Piano Concerto evoked an image of a gentle rain. She said, "There are rows of little raindrops falling into the puddle - they fill it with colors. They are light and cheery, and they are dancing on the puddle. No one has control of the bubbles, they are dancing because they feel like it, not because someone wants them to." Gina drew Plate #2 which illustrates the final image of her session. In this short (twenty-five minute) music program Gina experienced several therapeutic functions inherent in the music experience which helped her music transference to develop. At first, the music reflected and held her in her internal state so that she could experience and describe it fully. The holding function of the music also helped her to become engaged with the image of the blob. Clearly, the unmoving, heavy blob represented her current state, her despondence. This was Gina's "me" experience. Then, as the music developed, it moved her into a "not-me" experience. But here, Gina became resistant. Resistance to change is an expected reaction in therapy. Despite the fact that her

current state is unpleasant, it is nonetheless, familiar to her. As she felt the music transforming the condition of the blob she felt fearful about continuing with the unfolding imagery process. However, her relationship with me and with the music experience had developed enough for her to trust the process despite her resistance. In fact, her worst fear (of bursting) was not realized; but, rather, the "not-me" experience was one of melting, and brought her significant relief in the form of tears. Her discomfort was transformed to delight.

This "not-me" experience -- the melting of the rock into a puddle with dancing raindrops -- was a breakthrough for Gina. The "not-me" experience in GIM comes directly from the relationship with the music. It is often experienced as a "deus ex machina," an unexpected, previously unknown solution to an internal conflict for which the music is felt to be the transformative agent.

### ***Music Serves an Integrative Function***

I chose the music for this session specifically to fulfill Winnicott's essential therapeutic functions of holding, and presenting new objects (providing a "me" and a "not-me" experience). As it turned out, the music also served what Winnicott cites as the third essential nurturing function of the parent: the integration of the psyche and soma (Winnicott, 1971). This, he says, is accomplished through the parent's sensitive "handling," to assure that the child's sensory experiences are integrated, and that experiences originating within the mind are felt to be connected to, and residing within, the body.

Psychological change can occur with limited sensory involvement as, for example, when the music stimulates the metamorphosis of a visual image only. In this case a change in imagery may result in a significant change in the client's thoughts. For Gina, the music stimulated a multisensory experience of the blob that included both her mind and body. The music engaged, and transformed, not only the visual image (sponge--blob--rock--rain puddle), but also her feelings, thoughts, and body sensations. When the client is fully activated in this way by the "handling" of the music it is especially effective therapeutically because all of the senses are integrated into a deeply transformative change throughout the psyche. And when such deep transformation is attributed, in part, to the stimulus of the music, the client/music relationship, and hence, the music transference, is considerably strengthened. In Gina's first GIM session she experienced the three most essential mothering functions identified by Winnicott: holding, presenting new objects, and handling, in her relationship with the music. This session was Gina's

first step towards establishing a pure music transference.

*Experiencing and Working with the Pure Music Transference*

In traditional verbal therapy, inadequate nurturing experiences are projected directly onto the therapist. The client's ego can be repaired through the re-experiencing of these memories and their full emotional resonance, and subsequently understanding their impact upon the present. The establishment, experiencing and working through of the transference relationship is accomplished when the therapist becomes the catalyst and the container for the client's transference reactions. In GIM, transference is established and experienced in relation to the music, but it is expressed and worked through in imagery: music is the catalyst; imagery, the container.

For example, in Gina's GIM session, it feels to her that the music causes her image of the blob to harden and condense. This is her experience of the music as a restricting parental figure. Then, the restriction is expressed through the hardening of her image of the blob into a rock. In GIM the transference relationship is not worked with directly in the music, it is worked with in the imagery where it has been expressed. In addition, transference reactions are never interpreted or directly confronted during the music (Warja, 1995). The therapeutic interventions for Gina's transference reactions were twofold: first, to help her to be aware of, and stay open to, the effects of the music (to develop a relationship with it, even when it is unpleasant) and secondly, to work with her reaction to the music which is contained in her imagery. This is accomplished through simple descriptions of visual images, feelings, and body sensations that occur in order to bring the transference reactions into sharper, and more intense, focus.

Gina's first transference reactions can be identified by looking at the process that occurred in relation to the music and its expression through her imagery. Initially the music brought Gina's attention to the center of the blob and stimulated the life of a creature trapped inside. Then Gina described how the music seemed to solidify the blob, restricting the creature's life in the process. Symbolically, the initial life giving force of the music turned restrictive in just the same way that Gina experienced her parents who initially gave her life, but then severely restricted her as a child. The struggle between the trapped, living creature and the restricting, solidifying blob is a re-enactment of Gina's basic relationship with her parents. (The melting that occurred in relationship to the music was also a re-experiencing of Gina's childhood behavior when she felt restricted in her home and then ran outside into the field to cry.)



Gina's first two therapy sessions demonstrate the ease of using music and imagery to establish and express the transference relationship. Through her primary relationship with the music Gina re-experienced part of her past, inadequate experiences with her parents. Subsequently the image of the blob became a container for Gina's transference reaction and allowed her to symbolically re-enact, in the present, her early childhood struggle with her parents and its full emotional content. This experiential re-enactment between the trapped creature and the blob constitutes the beginning of Gina's transference relationship with music in GIM.

*Postlude: The Therapeutic Application of the Imagery Experience*

In GIM, the essence of the therapy takes place during the music. When the music experience is completed, the client returns to the upright position, and to a more usual state of consciousness for verbal processing of the imagery experience. Just as the prelude/induction serve as a bridge to bring issues from the client's life into the music experience, the postlude serves as a bridge to process new experiences and to take new understandings gained from the music into the client's life. However, the working through of the transference relationship takes place over time. In this session, Gina's second, she was not aware of her transference reactions, nor did I bring them to her attention. Rather, the postlude focused upon what she considered important from the imagery experience.

In the postlude Gina stated, "Now I know I still have my own self inside me. It's been trapped there for a long time. I have been letting other people, things in my life control me." The most important element in this session to Gina was that she had uncovered a positive aspect of herself that had been buried by alcohol for many years. She felt that this part was her "volition," and welcomed its return.

The effects of this session upon Gina were immediate and dramatic. First, and foremost, she reported that her "first thought wasn't to drink" when she encountered difficulty with her husband each evening. She reported an overall feeling of contentment each day, felt no need to cry throughout the entire week, and she was able to take time to enjoy recreational activities: to read and sew. Gina came to her next session stating clearly that her task in therapy was to come into contact with more parts of her "true" self. She was insightful about having lost parts of herself in her childhood - especially her sense of rebellion - and felt ready to work on "not pretending to be happy" with her friends and family, and to address her relationship with her husband.

### **Conclusion: The Eventual Resolution of the Transference**

In the finale of *The Magic Flute*, Mozart gathers material from the previous twenty musical numbers of the opera and reacquaints the listener with all that has transpired in the past, while simultaneously transporting the listener to the future. First the three spirits (three boy sopranos) re-enter and predict the future of the plot, and prevent Pamina from committing suicide. Then, Mozart reminds the listener of the opera's opening fanfare, and the call to the temple. This reminiscence is followed by the appearance of two men in armor who prescribe a course of action to the audience (Tamino and Pamina being elsewhere). Strikingly, Mozart uses the melody of an old Protestant Chorale, "Ach Gott, von Himmel sieh' darein" for the armored men's chorale, pulling the listener into the past of a previously composed, even archaic, piece; while simultaneously adding his own fugato accompaniment. Past, present and future are all melded into one. Pamina and Tamino are reunited, and Pamina sings to Tamino, but adopts Tamino's own aria for her musical material. Past becomes present transmogrified by Tamino's future guide and bride.

The finale of Mozart's *Magic Flute* contains a bewildering plethora of excursions back and forth in time and place just like the contents of our psyche when exploring psychological issues in therapy. The GIM client goes through an analogous process when attempting to reconcile past issues with present predicaments to achieve pluperfect futures. As great music always reflects these three elements of consciousness (Summer, 1992) the GIM practitioner can trust in classical music's ability to resolve the transference relationship.

Music begins with a problem, and as time progresses we hear the composer work out the problem in a continuous trip through the present, in order to obtain a future resolution. On this simple template, the GIM client transfers his or her own personal odyssey to wellness; juxtaposing past inadequate parental nurturing onto the musical composition; and exploring the possible avenues to health stimulated by the composer's musical explorations. The establishment of the pure music transference with classical music and its resolution through the experience of the juxtaposition of past, present, and future in musical material is the most powerful therapeutic tool available to the GIM practitioner.

### **References**

Agazarian, Y. & Peters, R. (1981). *The visible and invisible group: Two perspectives on group psychotherapy and group process*. London: Routledge & Kegan Paul.

Bonny, H.L. (1988). Forward. In L. Summer, *Guided imagery and music in the institutional setting* (pp. vii-x). St. Louis, MO: MMB Music, Inc.

Bonny, H.L. (1989). Sound as symbol: Guided imagery and music in clinical practice. *Music Therapy Perspectives*, 6, 7-10.

Bruscia, K. (1989). *Defining music therapy*. Spring City, PA: Spring House Books.

Bruscia, K. (1995a). The many dimensions of transference. *Journal of the Association for Music and Imagery*, 4, 3-16.

Bruscia, K. (1995b). Manifestations of transference in guided imagery and music. *Journal of the Association for Music and Imagery*, 4, 17-36.

Dalley, T. (1987). Art as therapy: Some new perspectives. In T. Dalley, J. Schaverien, F. Weir, P. Halliday, P. N. Hall, D. Waller (Eds.), *Images of art therapy: New developments in theory and practice* (pp. 1-35). London: Tavistock.

Goldberg, F. (1991, November). *Clinical Applications of GIM*, Lecture presented at the Bonny Foundation Guided Imagery and Music Advanced Training Seminar, Cookeville, TN.

Goldberg, F. (1995). The Bonny method of guided imagery and music. In T. Wigram, B. Saperston, & R. West (Eds.), *The art and science of music therapy: A handbook* (pp. 112-128). Netherlands: Harwood Academic Publishers.

Greenacre, P. (1990). The role of transference: Practical considerations in relation to psychoanalytic therapy. In A. Esman (Ed.), *Essential papers on transference* (pp. 124-135). New York: University Press.

Landy, R. J. (1992). Transference/countertransference and the creative arts therapies [Special issue]. *The Arts in Psychotherapy*, 19(5).

Mozart, W. A. (composer) *The magic flute* [opera]; Schikaneder, E. & Liesecke, C. L. (librettists); Martin, R. & Martin, T. (English translators).

Nolan, P. (1989). Music as a transitional object in the treatment of bulimia. *Music Therapy Perspectives*, 6, 49-51.

Summer, L. (1992). Music: The aesthetic elixir. *Journal of the Association for Music and Imagery*, 1, 43-54.

Summer, L. (1994). Considering classical music for use in psychiatric music therapy. *Music Therapy Perspectives*, 12(2), p. 130-133.

Summer, L. (1995). Melding musical and psychological processes: The therapeutic

musical space. *Journal of the Association for Music and Imagery*, 4, 37-45.

Summer, L. (1996). *Music: The new age elixir*. Amherst, NY: Prometheus Books.

Warja, M. (1995). *Music as mother: The use of guided imagery and music in working with the mother-daughter relationship*. Unpublished thesis, Bonny Foundation for Music-Centered Therapies, Salina, KS.

Winnicott, D.W. (1971). *Playing and reality*. London: Tavistock/Routledge.

Wood, M. (1984). The child and art therapy: A psychodynamic viewpoint. In T. Dalley (Ed.), *Art as therapy* (pp. 62-81). London: Tavistock.

### 1.5. Transition to Publication 5

*Group Music and Imagery Therapy: Emergent Receptive Techniques in Music Therapy Practice and Case Studies in Music and Imagery* [Chapter Sixteen in K. Bruscia & D Grocke (Eds), *Guided imagery and music: The Bonny method and beyond*. Gilsum, NH: Barcelona Publishers, 2002] initially examines the significant differences between group therapy theory/practice and GIM theory/practice. Whereas GIM pertains to the individual, to intrapersonal issues and dwells, purposefully, in the unconscious and other past experiences; group therapy pertains to exactly the opposite: to the collective, and to interpersonal, here-and-now issues that arise within a group process of developing unity. This contrast resulted in a rejection of the concept of “group GIM;” a group application of Bonny’s GIM method: “It did not take long to discover that the philosophy and technique of group GIM did not work in the real world of group music psychotherapy. . . I discovered that I was, in essence, conducting sequential individual GIM sessions with each member of my therapy group, which was antithetical to the desideratum of stimulating therapeutic group process” (p. 298).

I advocate that group music and imagery therapy be considered a “critically different entity” from individual GIM, the main distinction being that good group therapy should always be anchored firmly in a highly interactive, interpersonal here and now atmosphere (Yalom, 1983). After articulating the need to create a new approach to group work with music and imagery that stimulates positive group process and addresses specific clinical goals with institutionalized clients, a three level model of group music and imagery therapy is presented. The chapter describes the goals of each level, adopting Wheeler’s established structure of levels of music therapy techniques (Wheeler, 1983) but changing the first level from “activity” to

“supportive.” Supportive goals establish trust and engagement in therapy, re-educative goals increase self-awareness of maladaptive life/interpersonal patterns and self-understanding, and reconstructive goals address underlying existential and spiritual questions.

The function of each component of the group music and imagery therapy session (prelude, induction, music, and postlude) is explained and different components or functions are emphasized at each level of practice: for example, the induction as a strong common denominator with a positive aesthetic experience at the supportive level; positive verbal interpersonal interactions and aesthetic tension at the re-educative level; and group support and confrontation at the reconstructive level. Brief ideas and suggestions for inductions and music in group music and imagery therapy are given at each level of practice and especially clear distinctions are made between supportive and re-educative work. This publication defines the practice of group music and imagery therapy, clarifies how each of the components of a session function within the realm of group therapy, and provides an integration of group therapy theory into the practice of music and imagery. It describes how I developed new techniques in music and imagery that are distinct from the Bonny Method of GIM in response to the challenges of clinical practice, a process similar to the development of the BMGIM adaptation in the present study. In addition, it relates to the method section of the present study by clarifying each of the components of a session: prelude, induction, music and imagery, and postlude; and by giving guidelines and illustrations of each component.

---

**SUMMER, L. (2002). GROUP MUSIC & IMAGERY THERAPY: EMERGENT RECEPTIVE TECHNIQUES IN MUSIC THERAPY PRACTICE. IN K. BRUSCIA & D. GROCKE (EDS), GUIDED IMAGERY AND MUSIC: THE BONNY METHOD AND BEYOND. GILSUM, NH: BARCELONA PUBLISHERS**

Emerging from the fringes of pharmaceutical/psychological experimentation, Helen Bonny crafted a therapeutic to the unconscious which would obviate the necessity of Albert Hoffmann's chemical approach: Lysergic acid diethylamide tartrate Delysid, a.k.a. LSD-25. "My ego," the drug's inventor explained, "was suspended somewhere in space" (reported in Parfrey, 1987, p. 58). Bonny's nonpharmaceutical recreation, Guided Imagery and Music, a.k.a. GIM, was developed during the 1970's to duplicate the life changing peak experiences engendered by the ingestion of LSD, without the chaotic and dangerous psychological after-effects caused by the drug's invasive entry into the usually well-defended unconscious. Bonny discovered that

relaxation was a safer method to penetrate beyond a client's normal ego defenses deep into the unconscious using music as the (metaphorical) trepanation tool.

Bonny initially experimented with group music and imagery procedures using groups of therapists, friends and students (Bonny and Savary, 1973). Although she dabbled in developing an application of GIM for groups that she called group GIM, the training and the practice that Bonny developed were solely devoted to individual GIM with its goal of stimulating life changing, reconstructive imagery experiences. Group GIM was used as a stepping stone to interest people in individual GIM sessions - either to become a GIM client or to become a GIM trainee. Group GIM was a pedagogical technique, used in lectures, workshops, and trainings; not a classic version of group psychotherapy, but rather a helpful tool. A workshop leader could use group GIM to introduce large audiences to the idea of individual GIM, without the time-consuming process of having to give each potential practitioner and/or client an individual two hour GIM session.

Because group GIM mimicked an individual GIM session as closely as possible, adapting it for the group only when necessary (as in the element of individual guiding); many students of the technique (including myself) confused the pedagogical training for the technique itself. As a student at Western Michigan University, I studied French horn with Neill Saunders, a former symphony mate of Dennis Brain, (the reference will impress horn players). During one lesson I was playing the second movement of Mozart's fourth horn concerto (K 495), and Mr. Saunders admonished me for my playing. He said I was playing Mozart like it was Beethoven, with a dark, heavy and serious tone. He wanted my tone, articulation, and phrasing to sound "light and effortless." "Liser," he said sternly, metamorphosing my name in his heavy British accent, "lift up your right foot and bend it at the knee." Obedient to his instructions, I imitated the appearance of a resting stork. "Play from the beginning of the movement again." After a moment of disbelief at having to accomplish this seemingly absurd and impossible task, I played the first ten measures of the second movement standing on one foot. To my amazement, my sound became light and effortless just as my teacher desired. As clever a tool as it was, standing on one foot was merely a pedagogical technique. Saunders was not suggesting that I should commence performing on one leg outside of the practice room, in the real world of music performance. In my early practice of group work with GIM, it did not take long to discover that the philosophy and technique of group GIM did not work in the real world of group music psychotherapy.

When I began to apply group GIM in clinical settings as a therapeutic technique, I discovered that I was, in essence, conducting sequential individual GIM sessions with each member of my therapy group, which was antithetical to the desideratum of stimulating therapeutic group process. I was performing group therapy while standing on one leg. Similarly, many GIM practitioners have confused the concept of group GIM practice with the pedagogy employed in the teaching of individual GIM. Like my horn technique, group work needed a lighter adaptation of music and imagery to facilitate group, instead of in-depth individual process

Recognizing the need for group GIM to become more directed towards clinical goals, several music therapists altered the technique from its incipient form as a pedagogical technique into a valid tool for group music psychotherapy, (with sundry attendant changes in nomenclature.) I reported on adaptations with the elderly in 1981, calling the work "group GIM" (Summer, 1981); and in my 1988 monograph, *GIM in the Institutional Setting*, discussing individual and group work with hospitalized psychiatric clients (Summer, 1988), I proposed a differentiation between group GIM and GIM-related techniques. Short (1994) described her group work with physically disabled elderly clients titling it "music and imagery." In 1994 Goldberg described "modified GIM therapy for groups" of hospitalized psychotic patients; Blake and Bishop (1994) described adaptations for hospitalized clients with Post-Traumatic Stress Disorder (PTSD), with the term "group GIM therapy;" and in work with clients with eating disorders, Justice (1994) labeled her group work techniques as "music-reinforced relaxation" and "insight-oriented music and imagery."

Concurrent with the maturation of the group work was the increased acceptance of Bonny's pioneering work in the training and practice of professional music therapy. Many university music therapy programs adopted elements of GIM into the curriculum, and under the aegis of *receptive music therapy* techniques commenced the instruction and application of group music and imagery therapy. Group music and imagery techniques, integrated into the music therapy curriculum along with other receptive and active music therapy techniques, conform with Wheeler's (Wheeler, 1983) established schema of levels of practice; viz: supportive, re-educative, and re-constructive (Summer, 1999). Whereas the original group GIM technique has been misapplied, not as a pedagogical tool, but rather as an awkward form of seriatim individual GIM by music therapists and GIM Fellows alike, the group music and imagery therapy is clearly in the domain of music therapy practice because of its emphasis on stimulating interactive group

process through music. The practice of group music psychotherapy, including group music and imagery therapy, should be understood to require the education and training afforded professionally accredited music therapists.

### **Supportive Group Music and Imagery Therapy**

Most groups in institutional settings are comprised of clients whose psychological issues, cognitive or speech/language disabilities, or physiological limitations militate against bypassing conscious issues in favor of the unconscious. These client groups, as well as any client group in short-term therapy require a more structured technique that stimulates conscious, rather than unconscious imagery. For these groups the preferred level of treatment, supportive music therapy, fosters the growth of trust and unity among group members. In the beginning phase of group therapy, clients need to develop a feeling of trust for the leader as well as for each other, in order to become fully engaged in the therapeutic process. As interaction increases and trust deepens, participants will perceive each other as not only individuals; but also as members of a collective unity.

In an environment lacking trust and unity, group members cannot become fully engaged in a therapeutically beneficial group interaction. Group leaders may erroneously overlook the necessity of first developing group unity and cohesion in favor of a superficially meatier session involving what appears to be insight and self-understanding, but what is, in actuality, a simulacrum of insight and self-understanding. This simulacrum of group therapy plays well on movies and television, such as in the CBS group therapy parody "Big Brother," where confrontation between group members is entertaining to the viewers; but sideshow antics are nugatory from a therapeutic perspective.

Nor do therapeutic benefits arise from group members merely relating personal experiences or internal conflicts to each other. "There is nothing more deadening than a therapy group meeting in which a large group of people sit around unenthusiastically listening to one member discuss in great detail some aspect of his or her past or present life situation" Yalom, 1983, p. 48). In the case of GIM, Yalom's comment applies equally to the directionless sharing of complex imagery experiences, which "frequently . . . will have little meaning to the majority of other patients, especially to those who have had little opportunity to develop a close relationship with the narrator. At best, the listeners hope for a 'taking turns' format: that is, they hope that in time their turn will come when they, too, will be allowed to present their life problems" (p. 48)



or, analogously: imagery experiences. Yalom remarks, "Time after time I observed well-trained clinicians who were ineffective group leaders because they did not know how to turn the group's attention onto its own process" (p. 21). Successful group therapy must be built on a solid foundation of the group's sense of community. Without this foundation, in-depth interpersonal work cannot be effective.

The imagery stimulated in supportive group music and imagery therapy must provide the clients with a catalyst for immediate and positive interpersonal interaction. "A group in which members continually express their observations of, and feelings toward, one another is a group in which no member of the group is very far from center stage. All members have the sense that they may be centrally involved at any moment in the group. . . A group focusing on the here-and-now, on its own interaction, is almost invariably a vital, cohesive group" (Yalom, 1983, p. 48).

Positive interaction among group members requires imagery experiences that are easily described and understood. There should be no obstacle to the group members relating to and validating each other's imagery. The group leader, or the group itself, should develop a simple induction to frame the music experience. The induction can be a feeling, a concept, a word, or a visual image that provides a topic upon which group members will focus during the music. It should clearly present a positive internal experience rather than a conflictual one. A positive image allows for increased feelings of safety, positive self-esteem and a strong feeling of being part of the group. When clients have psychological conflicts and anxiety that are close to the surface, it can be difficult for them to focus upon a positive internal experience. At the beginning of therapy it is imperative for the leader to take the responsibility for helping to hold these conflicts in abeyance until the group builds enough unity to address conflicts effectively. Like the role of a parent in protecting a newborn child from unmanageable anxiety, the leader's role is to hold away conflictual material in favor of an initial positive experience. Typical inductions that stimulate a positive experience are words such as "connection," "support," or "strength"; a visual image of a supportive family member, friend, or group member; or suggestions of feeling safe, relaxed, or energized.

The induction must also provide a strong common denominator - a shared platform upon which group members can easily interact. When group members enter a group they are naturally preoccupied with their own *sui generis* life concerns. These individual concerns are often so threatening as to obstruct the group cohesiveness necessary for trust. The group therapist must

create an experience in the "here-and-now" to help group members set aside their individual concerns so that they can discover a positive common denominator upon which it is possible to construct the prerequisites for true group process. Leading the individual group members to common ground is a necessary first step in group therapy. The induction in supportive work is usually task oriented as opposed to an induction that encourages exploration. For example, directions to create a short poem about a feeling, such as "safety" or "security," or to draw a visual image that is "relaxing" provide a simple and concrete task that holds the clients in a common, positive feeling that will establish a sense of group unity during and after the music is played.

The role of the music in supportive group music and imagery therapy is to provide a common aesthetic experience; a musically bound common denominator which will engender a feeling of group unity. Music contains and focuses the imagery experience. With short-term inpatient psychiatric groups Goldberg (1994) found that "Because of the possibility of eliciting overwhelming affect and conflict laden images, the music must stimulate an emotional response and allow images to emerge while concurrently limiting their dynamic movement" (p 27). Goldberg recommends the use of "music with a narrow range" (p 31) to allow a "very brief imagery experience without the dynamic unfolding that is characteristic of standard GIM sessions (p 28)." Either classical or non-classical music, of five to ten minutes duration, with minimal musical development and considerable repetition helps clients to keep focused upon one image. In the classical genre, pieces or movements of pieces from the baroque, classical, and or light romantic eras with little musical development can be utilized. Pieces such as Reger's *Lyric Andante*; Dvorak's *Serenade for Strings*, opus 22, movement 1; Warlock's *Pieds en L'Air*; Bach's *Shepherd's Song from the Christmas Oratorio*, BWV 248; and Mozart's *Horn Concerto #4* (K. 495), 2nd movement are examples from the classical genre. Non-classical pieces that I have used include "River Run" from Paul Winter's *Canyon*, "Caribbean Sea" from *Earth Tribe Rhythms*, and "Celestial Soda Pop" and "Falling in the Garden" from Ray Lynch's *Deep Breakfast*.

After the heart of the session, the therapist must consider how to reinforce any positive feelings that have emerged from the music and imagery experience; and determine a strategy which encourages the continued growth of group unity through an interactive music therapy technique. To "hold" the group in the positive feelings that have been elicited, the therapist

employs music making techniques such as spontaneous song writing, structured improvisation, or singing. For example, in a group session in which group members have created poetry about feelings of safety as described in the induction above, the therapist could utilize a song writing technique in which each poem is turned into the verse of a song, structured musically by the therapist. Alternatively, the group could work cooperatively to create a group song by writing lyrics that combine key words from their poems. Creating an instrumental or vocal improvisation or simply choosing a precomposed song whose words and music reflect positive feelings of safety and group unity and will encourage the group to sustain its cohesiveness until the end of the session.

### **Re-educative Group Music and Imagery Therapy**

Re-educative group music and imagery therapy fosters change through insight. The re-educative level of treatment is utilized in the second phase of group therapy, the working phase, and only after group trust and unity have been established by prior successful sessions of supportive group music and imagery. In the working phase of the group process, the group can interact more independently from the leader since the group has developed active, supportive relationships among themselves. The re-educative level is the usual type of treatment for long-term group work, or for an institutionalized client group whose members have good basic ego strength.

The goals of re-educative group music and imagery techniques are to help each client to experience himself in relation to other group members and to bring greater self-awareness and self-understanding. The leader facilitates group members to help each other become aware of maladaptive patterns of interpersonal relating that are hindering daily life. "By helping individual patients to see themselves as others see them and to understand their maladaptive ways of relating to others in the group, the therapist will help patients understand what has gone wrong in their individual social worlds at large" (Yalom, 1983, p. 175). In the beginning phase of group work, focusing upon each client's differing psychological conflicts is detrimental to the establishment of group unity. However, once the group is cohesive, self-understanding can occur as group members, no longer threatened by their differences, can learn from them.

In re-educative group music and imagery therapy, the induction continues to serve as an initial frame for the music experience. The induction can now be designed to stimulate significant differences among group members' imagery experiences. Since supportive

interpersonal relationships have already been established, the group process can now address the serious individual psychological issues of the its members. Rather than holding the group away from conflict, the induction can now serve as a platform upon which group members can interact regarding their own psychological conflict. Inductions that allow for a more internal individualized topic usually include a relaxation procedure such as deep breathing exercises, a simple muscle relaxation, or a centering exercise. Topics for a re-educative induction include the clients' current mood, a specific relationship, a current life question (such as "Where is my life going?"), and a conflictual life situation.

The music chosen for the re-educative level of practice serves the same aesthetic and containing functions as in the supportive level. It should be repetitious, with little musical development. However, to stimulate a greater variety of responses in group members, the music should be of greater length and complexity (structural and textural.) In the classical genre, some simpler slow movements from classical or romantic symphonies, as well as the exposition sections of first movements of romantic symphonies. I have found Webern's *Langsamer Satz*, the opening six minutes of Wagner's *Siegfried Idyll*, and the second movement, in its entirety, of Beethoven's seventh symphony, to be useful.

Re-educative group music and imagery usually proceeds to verbal, rather than musical, processing; though the discussion should not concentrate upon the solution of the conflictual issues brought up by the induction and the music. In the postlude of the session group members can do little to help each other solve conflicts, but group members have a great deal to reveal to each other in regard their perceptions of each other's imagery and in regard how they present their imagery to the group. The goal of processing imagery experiences in re-educative group music and imagery is not to simply reinforce the experience generated by the music as it is at the supportive level, nor is it to relate the imagery experience to the client's conflicts outside the group. The interactive processing of the imagery experience serves to help each client investigate how his internal conflicts are represented through the imagery experience, and how these conflicts impact his interpersonal relationships with specific members of the group. The therapist facilitates each group member to respond emotionally to each others' imagery, and utilizes the group's images to stimulate significant supportive and confrontive interaction among group members. The group becomes a therapeutic agent for each group member through their natural emotional responses to each others' imagery.

## **Reconstructive Group Music and Imagery Therapy**

The reconstructive level of group music and imagery therapy fosters reconstructive ego change through personal and transpersonal transformation. It is used infrequently since it is only appropriate for long-term group work and for clients with good ego strength. It is only utilized for groups with consistent and committed group members, and only when the group is in existence long enough to delve into more serious underlying personal, existential, and spiritual questions.

Inductions used in reconstructive group music and imagery sessions are similar to those used in the re-educative level in that they serve to stimulate significant differences among group members' imagery experiences. However, at the reconstructive level they include an extended relaxation procedure to allow for a deeper state of consciousness and focus upon existential or spiritual issues.

Evocative classical selections of approximately ten minutes in duration, with a wide range of elements and more complex development sections are used in reconstructive work. Selections from the classical genre such as middle movements from larger romantic works are appropriate for reconstructive group music and imagery sessions. Some pieces I have found especially useful are the third movements from Brahms first and third symphonies; and the fourth movements from Mahler's fifth, and seventh symphonies.

As in the re-educative level of group work, the verbal processing in reconstructive group music and imagery still keeps the focus upon an active group process of support and confrontation.

Of course, group process is not as cut-and-dried as the linear three-level description above. The type of group process to be activated is determined by the spontaneous needs of the client group. Many groups will remain in the supportive, or beginning, stage for the entire life of the group. This is quite usual for inpatient groups whose membership consists of clients with serious diagnoses, for short-term groups, and for groups with high client turnover. Other groups will quickly develop a sense of cohesion, and be ready for the working stage within a short time period. In addition, the three levels of practice indicate the intention and goals of the group leader, not the actual result of the group. For example, in leading a supportive music and imagery group, group members will, of course, develop insight even though this is not the focus of the group.

## Conclusions

Group music and imagery therapy, which was born of the pedagogy of GIM, has grown up, and in order to attain its potential as a therapeutic tool must be recognized as a critically different entity than its parent. GIM is a psychotherapeutic tool that pertains to the individual, to the unconscious, and to a broad range of personal and transpersonal issues. Group music and imagery therapy pertains to the collective, to the conscious, and to a narrow range of immediately relevant personal issues. In GIM the imagery is often unpredictable and difficult to verbalize; even, at times, ineffable. It may leap effortlessly from conflict to accord. Contrarily, the process necessary for beneficial therapeutic results in group music and imagery requires controlled and linear positive imagery which can be easily verbalized and described. Discordant imagery is to be avoided until and unless prerequisite group harmony has been achieved in preliminary supportive group sessions. The process of GIM is intrapersonal and dwells in the past; group music and imagery therapy is interpersonal, highly interactive, and anchored in the "here-and-now.." The GIM practitioner uses music that is evocative, hence the prevalence of Romantic period pieces with extended development and textural complexity; whereas the group leader in group music and imagery therapy must utilize music that is contained and minimally textured, hence the reliance on pieces focused on exposition with minimal development and orchestral textures of greater simplicity as well as the inclusion of non-classical music with its modicum of musical depth. Finally, the group music and imagery techniques described in this chapter are not group versions of GIM. They are techniques of receptive group music therapy, and reside in the bailiwick of the music therapist, whose education in the immediacy of interaction through receptive and active music and whose background in working with the elderly, psychiatric, medical and other special needs populations, are necessary prerequisites for true group music therapy to occur.

## References

- Blake, R.L., & Bishop, S.R. (1994). The Bonny method of guided imagery and music in the treatment of post-traumatic stress disorder (PTSD) with adults in the psychiatric setting. *Music Therapy Perspectives*, 12(2), 125-129.
- Bonny, H.L. (1994) Twenty-one years later: A GIM update. *Music Therapy Perspectives*, 12(2), 70-74.
- Bonny, H.L., & Savary, L.M. (1973). *Music and your Mind*. Barrytown, NY: Station Hill

Press.

Goldberg, F.S. (1994). The Bonny method of guided imagery and music as individual and group treatment in a short-term acute psychiatric hospital. *Journal of the Association for Music and Imagery*, 3, 18-33.

Justice, R.W. Music therapy interventions for people with eating disorders in an inpatient setting. *Music Therapy Perspectives*, 12(2), 104-110.

Parfrey, A. (Ed.) (1987) *Apocalypse culture*. New York, NY: Amok Press.

Short, A.E. (1992). Music and imagery with physically disabled elderly residents: A GIM adaption. *Music Therapy*, 11(1), 65-98.

Summer, L. (1988). *Guided imagery and music (GIM) in the institutional setting*. St. Louis, MO: MMB Music.

Summer, L. (1981). Guided imagery and music with the elderly. *Music Therapy*, 1, 39-42.

Summer, L. (1999, November) *Introduction to guided imagery and music*. Paper presented at the World Congress of Music Therapy, Washington, D.C.

Wheeler, B. (1983). A psychotherapeutic classification of music therapy practices: A continuum of procedures. *Music Therapy Perspectives*, 1(2), 8-12.

Yalom, I.D. (1983). *Inpatient group psychotherapy*. NY: Basic Books.

## 1.6. Transition to Publication 6

*Case Studies in Music & Imagery* [published as Summer, L. & Chong, H.J. (2006). Music & Imagery Techniques with an emphasis on The Bonny Method of Guided Imagery and Music. In H.J. Chong (Ed.) *Music therapy: Techniques, methods, and models*. (Korean language). Seoul, Korea: Hakjisa Publishing Company] begins with descriptions of two unsuccessful case studies, one individual and one group, in order to illustrate the need for developing new music and imagery techniques in my private practice. I use my personal relationship with music as an additional reason for the development of supportive and re-educative music and imagery techniques. The article presents three levels of individual music and imagery therapy (supportive, re-educative, and reconstructive; from Wheeler, 1983) and explains how each level of practice addresses a client's emotional limitations. Each level uses a different approach to these limitations and yields different outcomes.

For example, when a client presents with significant psychological symptoms such as major depression, obsessive thoughts, and distanced interpersonal relationships, he is contraindicated for reconstructive therapy (GIM), and a supportive music and imagery technique is indicated for treatment. This is achieved with a therapeutic focus on healthy and positive internal resources; by the values of spontaneity, play, creativity, and authenticity. At the supportive level, simple repetitive music is used to hold a client in a specific, positive image. The music's aesthetic beauty is the facilitator to access positive feelings contained within the image.

If a client presents with significant psychological symptoms such as anxiety, but has access to positive internal resources, a re-educative music and imagery technique is indicated for treatment. This is characterized by a direct focus on symptoms or conflict in order to gain insight or a new perspective. The focus at this level of therapy is not on change, but rather it addresses the emotional denial that accompanies the client's symptoms. The goal is self-acceptance; the approach is psychodynamic, insight-oriented, and focused on symptoms. At the re-educative level, the client listens to music while focused on a specific image of tension (as a problem or symptom). The tension within the music becomes identified with the tension inherent in the image. The client transfers the aesthetic properties of the music to his internal image, thus his tension becomes imbued with feelings of beauty, bringing acceptance and a new perspective to his symptom.

When a client presents with access to positive internal resources, a healthy perspective in regard any current symptomology, and is not contraindicated for reconstructive work, then GIM is indicated for treatment. This is characterized by a focus that examines the underlying, unconscious roots of existing emotional tensions and delving into existential and spiritual questions. At the reconstructive level, an initial piece of music that matches the client's emotional state serves to stimulate specific images. Subsequent pieces of music alternate between tension and restfulness. GIM programs contain music with strong patterns of tension/release that match the client's inner tension. Additionally, the music offers fluidity, movement, and healthful processes that the client can translate into psychological solutions to his problems.

For each level of practice, goals and outcomes are explained, and an in-depth clinical illustration shows how each component of a music and imagery session works with special



attention given to the function of the music at each level. This publication was instrumental in the design of a new model of GIM training which replaced the initial training seminars (Level I and II seminars) with specialty seminars and practica in supportive and re-educative music and imagery as a precursor to GIM seminars. The review of clinical and educational materials along with the descriptive case material from this chapter strengthened my understanding of adaptations of the Bonny Method of GIM and led to the present adaptation – music-centered GIM – which is the clinical protocol of the present research study.

---

**SUMMER, L. & CHONG, H.J. (2006) CASE STUDIES IN MUSIC AND IMAGERY TECHNIQUES**  
**PUBLISHED AS: MUSIC AND IMAGERY TECHNIQUES WITH AN EMPHASIS ON THE BONNY METHOD OF GUIDED**  
**IMAGERY AND MUSIC. IN H.J. CHONG (ED.) MUSIC THERAPY: TECHNIQUES, METHODS, AND MODELS**  
**(KOREAN LANGUAGE). SEOUL, KOREA: HAKJISA PUBLISHING COMPANY**

The genre of music therapy broadly defined as “music and imagery” is predicated on transcendence – transcendence of the external reality in which we are all immersed with its practical limitations; in favor of the internal world which has no limitations but that of the individual’s imagination. In *Guided Imagery in the Institutional Setting* (1988), my monograph on Guided Imagery and Music, (GIM: a specialized practice in the music and imagery field,) I began, “We are what we imagine.” As naïve as that premise is, it is nonetheless potentially true for all humans, internally. The freedom that I experience in my imagination transcends the limitations imposed upon me by external forces (my parents, society, the expectations of peers, and the like) which informed my childhood. The kind of music therapy I attempt to deliver as a music and imagery practitioner uses techniques which focus upon the internal world in order to provide my client with permission to transcend emotional limitations imposed in childhood. Just as I used music as a young woman to transcend the limits of my upbringing, so do I attempt to provide the music and imagery client with the freedom to overcome the anxiety and depression which is the result of insufficient parental nurturance, inconsistent societal restrictions, or externally imposed traumas; and to achieve the potential of higher goals than simple comfort: the transcendence of reality and the attainment of self-actualization.

### **Introduction: My Personal Relationship with Music**

“The childhood shows the man,  
 As morning shows the day.”  
 – from *Paradise Regained* by John Milton (1608 – 1674)

As a music therapist I have reflected on my first impressions of the power of music to transform. Lessons of my youth, taught by the universe at large, without direction; with the advantage of age and experience gained since childhood, have informed my understanding of this transformative power. In my own case, music was the vehicle for my departure from childhood. My parents, who were supportive of me so long as I was their baby, became confused and incapable of open and honest communication with me during my adolescence. My parents withdrew into a gentle silence; unwilling to cope with my emergent intensity, my anger, and my contradictory need for parental nurturance. Neither my mother nor father offered me safe harbor during my passage through the typical tempestuous teenage years into adulthood. I took my anger, my frustration, my scorn to a new parent: music. I practiced piano and French horn, and listened to the rebellious popular music of my generation, as exemplified by the rock'n'roll music of the Rolling Stones. Listening to and playing music satisfied my desire for an emotional outlet, which my parents could not provide. It seemed to me that music “understood” me as my parents could not. It reflected the sublime and the overwrought emotions I was experiencing. During this period of my life I rarely listened to calm or stylized music. Though I did practice and perform Mozart, for example, I would not choose Mozart to put on the stereo. Upon reflection, I think now that the calm passivity of my parents precluded me from choosing Mozart. Rather, I needed the relative chaos of Mahler and his ilk to support my strong feelings; and the Rolling Stones and Mahler understood and supported me then more than any relationship in my life. I felt more human, more real and truly “myself” *only* in music then.

Music allowed me to individuate. It was impermissible – so I understood – to be or to act angry with my parents, but I discovered that I could be angry, *non-verbally*, as I played or listened to music. My parents could not support the intense parts of my emerging personality, but they supported and encouraged my development as a musician. They bought me a piano, a horn, provided me every opportunity to study, perform, and practice; and encouraged me to major in music in college, when finally it was time for me to leave home.

So, it was music that helped me develop a full repertoire of emotions through my adolescence, rather than the limited palette that was modeled for me by my emotionally restricted family. As I traveled the path of music therapy education I was, naturally, drawn to the philosophy of emotional permissiveness that defines music and imagery. The support my family gave to me in my study, performance and listening to emotionally liberating music is reflected in

the structure of the GIM session, (crafted by Helen Bonny) in which the GIM therapist (the guide) serves the function of support, from which is created a musical space for the client to individuate. The function of the music is to support the client emotionally in a more liberating and limitless way than a human relationship can do – support that carries with it no pejorative judgments, support that transcends words.

I went to college as a music education major, at Temple University in Philadelphia; but at Temple I began to worship music, and education could not contain this devotion. I switched my major to performance and became an acolyte of music in the form of a performer. While engaged in this – to me – holy obeisance to music my uncle Harry died. I despaired, suffering a deep existential crisis with attendant physical symptoms. I was unable to eat or sleep regularly. Receiving little comfort from my family, and uncomfortable with the idea of looking for empathy with my peers, I found solace in the repetitious practicing of a simple piece by Gliere, the *intermezzo*, opus 35, number 11. After each obsessive iteration of the two and a half minute piece, I would lower my head and cry. Finally, following about ten reiterations, I felt relief. The veil of my heretofore inescapable despair had lifted and did not return. Whereas the wild music of my adolescent revolt carried me beyond my “here-and-now” feelings; the simple repetitive phrases of the Gliere held me in my inconsolable sadness, in essence forcing me to accept the loss of my uncle and to absorb the incontestable triumph of death. Rather than transcending the reality, the intermezzo held me down to Earth, an acceptance of reality. Later, I would appreciate the lesson of the lyrical passage, that music could facilitate the acceptance of external reality, of feelings that seemed imposed, rather than elicited. Without the Gliere I was burdened with feelings that seemed overwhelming, incapable of resolution, and unmanageable. I learned that people who come to therapy desiring to ignore large parts of their internal world, as I wished to do in regard the loss of Uncle Harry, need to come to terms with them rather than reject them. With the inchoate understanding that the application of this musical remedy had relieved my symptoms of despair and forever altered my perspective on the meaning of life I changed my undergraduate major one last time, from music performance, to music therapy.

The undergraduate field of music therapy was primarily behavioral, not concerned with the examination of complex internal issues. Self examination, awareness, and deep emotional expression were not subjects of the field at an undergraduate level. It was not until I graduated that I could recommence my exploration into the more esoteric and elevated goals of music and

imagery. Concurrent with graduate work at Hahnemann Medical College, (now called Drexel University) I was fortunate to begin the study of GIM with its founder, Helen Bonny, during GIM's incipient stage in the field of music therapy (Bonny & Summer, 2002). Her first students, amongst whom I could be counted, were guinea pigs, and its restrictions were not immediately evident. In the beginning it was conjectured that GIM could be universally applied, a concept that was eventually superseded by a healthy reconsideration as GIM was experimentally expanded and tested with individuals by the handful of initial practitioners. The principles of humanistic and transpersonal therapy were taught in media res by Helen Bonny herself in a three tiered training program that continued to redefine its boundaries even as I soon became a GIM trainer myself, assisting Bonny. Eventually I became the director of GIM training at the Bonny Foundation. Choosing music for sessions, the methods for stimulating imagery, and the role of the guide were developed in collaboration with Bonny and her first students; however, clinical applications were not yet explored.

### **Group Case Study: A Supportive Music and Imagery Session**

Gieng heut' Morgens über's Feld,  
Thau noch auf den Gräsern hieng  
sprach zu mir der lust'ge Fink;  
"Ei, du! Gelt? Guten Morgen! "  
Wird's nicht eine schöne Welt?"

I went out this morning over the countryside,  
dew still hung from the grass;  
the merry finch spoke to me:  
Oh, it's you, is it? Good morning!  
Is it not a lovely world?"

– from *Songs of a Wayfarer*, text (and music) by Gustav Mahler

Some of the uses of GIM as a tool for group music psychotherapy were first tested at Northwestern Psychiatric Institute – an in-patient psychiatric hospital with a 28-day program for addicts post-detoxification (Summer, 1988).

My training with Helen Bonny had taught me how to do GIM, but primarily with other therapists. We trained mostly with each other as clients. I had no real idea how to deal with adult clients who were not equally interested in the technique, or who were resistant to treatment. In my very first group session I encountered a monumental resistance when I tried to treat a group of twelve angry alcoholics and drug addicts with Debussy. It appeared that these dozen hospitalized clients did not find it plausible that I could offer them any valuable assistance to their travails. The group members voiced opposition to my selecting music for a therapy session, and they scoffed even at the idea of music therapy. If there was to be music, they wanted music that they liked, not some French impressionist orchestral composition. In the session prelude,

group members openly mocked me and were hostile to my suggestion that they “close their eyes and imagine relaxing in a meadow.” Nevertheless, I persevered, and played the *Dances Sacred and Profane*, by Claude Debussy. Following the music, I asked each group member to share their experience. The responses were at first unanimously resistant. They reported their boredom, that they slept, that they disliked the music, that they simply wished they were somewhere other than in the session room. One client, however, diverged from the group, reporting that he had imagined – vividly – “a beautiful meadow,” a truly peaceful place where he had never been, and that as the music played, he felt like he knew well the music, though, he explained, in fact, he had never before listened to classical music. Because he “knew” the music, (though by “knew,” he did not mean that he had ever heard it before,) he felt comfortable going into the meadow, as if he belonged there. He felt, he said to me and his fellow group members, like he “just knew the music,” and so, he could dance to it; which, he asserted, he had done. In his imagined meadow he danced to Debussy. His relation of the impact of this positive internal experience was evident not merely to me, but to his peers as well. Here, amongst these emotionally injured, angry men; he appeared calm and centered; uninhibited in his recital of his imagery and feelings, unconcerned about the group’s possible hostility to him and his experience. In the next, and subsequent sessions, the group’s resistance was significantly lower; due not to my inept therapy, but rather, I think, to the good fortune of the presence of this one client, amongst the twelve, who fortuitously wanted to find amelioration.

This session taught me that I needed to radically change my approach to the use of music and imagery with psychiatric groups. The components (prelude, induction, music, and postlude) so effective with normal individuals who wanted GIM, was disastrously ineffective in group situations. The use of a broadly symbolic image with evocative classical music which is the hallmark of the GIM method had stimulated a meaningful experience for one of the twelve group members, but had narrowly avoided catastrophe with the other eleven. Additionally, my failure to directly address the issues which had placed these twelve men in a psychiatric hospital in the session prelude was negligent. I wasn’t doing therapy, I was *performing*, in this case “performing” GIM, just as I would perform a horn concerto, treating the group as an audience, not an assembly of clients. It was no wonder that the group had been resistant and hostile. During the year I worked at Northwestern Psychiatric Hospital with clients diagnosed with depression and anxiety disorders, as well as with addictions, I began to adapt Bonny’s GIM model to more

effectively serve the client population. Utilizing very simple classical pieces with minimal development sections and a narrowed use of musical elements in order to stimulate singular, simple images that can be easily, and efficiently, shared in a group setting within a one or one and a half hour group session helped group members relate and empathize with each other. The inductions needed to be goal oriented. Dancing to Debussy in a meadow was not an especially useful way to help an addict cope with the decision to drink or not to drink. Granted, one of the twelve group members began to open up to therapy, but that was a very low percentage of moderate success to rationalize continued like manner treatment. Positive inductions were more powerful in activating group dynamics so that even when every group member did not have a positive experience, the group as a whole benefited from the sharing of those that did. Frequently, a domino effect would evince itself, as the positive imagery and progress from several group members encouraged the less affected individuals to lessen their resistance to therapy. Many of these clients pejoratively equated imagery with fantasy, and fantasy to many of these men seemed either effeminate or absurd. If the inductions shared a common denominator to which all the members could relate, even the disaffected did not feel left out of the therapeutic process. Seeing their fellow group members enjoying some improvement through music and imagery was in itself ameliorative, if to a lesser degree. Additionally, the value of the common denominator allowed group members to empathize with each other because they understood the imagery. It was useful to either give the group an imagery induction that included directions for a concrete task, such as drawing, writing, or movement; or for me to narrate an imagery induction during the playing of the music. Either technique helped the clients access positive experiences during the music by stepping over their internal resistance to the abstract and esoteric idea of imagination.

### **Case Study: Kyle – A Supportive Music and Imagery Session**

<p>“Nel mezzo del cammin di nostra vita  mi ritrovai per una selva oscura  che la diritta via era smarrita.  Ahi quanto a dir qual era è cosa dura.”. . .</p>	<p>Midway on life’s journey, I found myself  In dark woods, the right road lost. To tell  About those woods is hard. . .</p>
---	--

– from the beginning of Dante’s *Inferno*, translated by Robert Pinsky

In 1993 I began a private practice with adults. I worked with several therapists who referred clients to me for music psychotherapy. The clients were not hospitalized, rather, they

were working members of a large island community, many of whom held positions of responsibility and authority.

Kyle, a physician, came to our first session in an expensive and stylish suit and tie; and a starched white, monogrammed shirt. This was not a broken-down addict in ripped jeans at a psychiatric hospital. He was, evidently, smarter and more prosperous than me and I wondered what possible help I could offer an upstanding citizen who helped run our island community? Referred to me by his primary therapist as depressed and obsessive-compulsive, he seemed so articulate, healthy, aware of himself and in control, that even when he himself talked about being depressed and obsessive, I wondered whether he was simply confabulating. When he told me that he worked obsessively, at least ten hours a day, six days per week; it seemed to me gallant and caring in regard his professional field. He could not rid himself of the feeling that his work was inadequate. Married, with two children, the fifty year old professional was on medication for obsessive-compulsive disorder and major depression. He had been in verbal therapy for about two years. Verbal therapy and medication had improved many of his depressive symptoms but his primary therapist had reached an impasse in her work with him to lessen his hours at work, to slow down his pace while he was at work, and to deal with his feelings of inadequacy.

Kyle spoke with celerity and perspicacity; changing topics faster than the island's chameleons changed color. In an early session I played for Kyle a Bonny program containing chatoyant impressionistic music with a great deal of musical tension; my goal being to match his demeanor. In a GIM session, when you can match a client's in-the-moment state with music, they feel "understood," "heard" on an emotional level and can go into the music to experience its healthful processes. Having matched his state, the music stimulated an experience, as Kyle told me once the music concluded, exactly analogous to how he viewed his life. As Kyle listened he reported fleeting and disturbing images. "I see swirls, they are coming at me very quickly . . . now there are sketches, like black and white drawings of birds . . . it is very dark. . . Everything is coming and going so fast, I can hardly recognize anything; I am trying to slow things down, but they won't listen to me . . . I am in a tomb – a grave, it is so dark and empty, I think I am in the tomb; I am trying to get out but I can't . . ."

I tried several different pieces of music to see if the change in music would elicit a change in the nature or pace of his experience. No change in the music resulted in significant changes in his imagery. These unvarying images, Kyle told me, were akin to "symptoms" that

afflicted him in his everyday life, a life he described as unconnected, distant. Nothing, he insisted, had real meaning to him, and he felt powerless to make any changes, as if he were simply an ineffectual observer of a life consisting of a series of mostly unpleasant events. Work, relationships, events, were all remote from him emotionally; and the prosperity, success, and intellectual achievements that he had obtained were without meaning.

Kyle worked obsessively to feel accomplished, bringing him fleeting positive thoughts, but kept himself emotionally distant from the fruits of his labor. Intellectually he justified his disengagement as a necessity, paradoxically denying himself the joy of the rewards he worked so hard to accomplish. The momentary positive feelings generated by his accomplishments were destroyed by what was underneath, in the unconscious: an internalized (introjected) version of his mother (a depressed, needy perfectionist who was emotionally abusive to Kyle and whose behavior was highly inconsistent in his childhood) and his father (who was highly critical, emotionally abusive and paid little attention to Kyle). The internalized figures of his parents continued the abuse and criticism of his childhood and thus denied him any lasting feelings of self-worth. Instead, as revealed in his imagery, his inner world consisted of shells of defensiveness, nested in further shells of defensiveness. Feelings of sadness, helplessness, powerlessness, anger, despair, vulnerability – all the responses he had had as a child to his parent's emotional abuse – were by this time, chronically patterned in his unconscious. His imagery also uncovered the dark roots beneath his depressive defenses: a deep existential fear of death. When younger he had periods of intense nightmares and night terrors that his parents had not addressed in any way.

Using GIM had yielded, for Kyle, imagery that was fragmentary, fleeting, and out of control; but I believed that this experience would be helpful to him; that it would help him face his difficulties and bring him a new understanding of himself. Experiencing how out of control his life was, I thought, should bring him motivation to change – to work less, slow down, to become more engaged and thereby live life more fully. But when Kyle returned for his next session it was clear that his condition had seriously worsened, due to the GIM session. He reported to me that in the previous session he had realized how out of control his life was; and that during the previous week he had felt an increased sense of hopelessness about himself. Instead of relief and reinvigoration he was despondent. He had become acutely aware of his wife and children's complaints about his emotional distance from them, and yet, he could not respond.



He also felt inadequate in regard our prior session. He did not understand what the images meant and so he felt stupid. He was convinced that I understood exactly what all those images meant psychologically and that I was judging and analyzing him as really sick. He was pale, could not look me in the eye, seemed totally miserable, and his fragmented manner of speaking had worsened.

Though most people have had some injurious parenting in their childhood, there are nearly always aspects of positive nurturance as well. When imagery is conflictual, one can expect some evidence of ego strength (positive resources, positive adaptations to tension and abuse,) and even when such is not evident in a client's imagery, there is likely to be evidence in the client's positive response to the images. Kyle had no positive feelings whatsoever. If there was any ego strength, it was completely obscured by his unremitting depression. Though I did not expect to be able to remedy every client's symptoms, it seemed here that I had actually made the situation worse. I wanted to rescue Kyle from himself, to give him some relief from his horrible and fragmented world, but I was at a loss as to how to proceed.

It was clear to me that GIM would not help Kyle address and improve his symptoms. I had experience with clients whose internal world was replete with negativity, but I had not yet dealt with a client in my private practice who was so incapable of doing anything about it, one whose positive internal resources were so unavailable to him – even with the help of psychiatric medication. I questioned whether a positive experience was even possible for Kyle; or whether I was simply not capable of the effort and intellect required to “reparent” him, to give him the positive, nonjudgmental nurturing his parents had refused him.

There had to be a positive experience upon which to rebuild his ego, a positive innocent Kyle that existed prior to his abuse, but I did not know how far back in the past this true positive self remained, nor how deeply buried within his unconscious it was. As a beginning therapist I was determined to help him find this positive kernel, but I did not have the technique or skills to locate it. I needed an approach to music and imagery that was lighter, more structured and more directive than GIM. For several sessions I explored different approaches: relaxation techniques, music without imagery, imagery without music; though I was anxious myself about whether I was doing any good. At least, I thought, let me do no more harm.

In the eighth session came a breakthrough. I asked Kyle to tell me if he had had even one positive, quiet moment by himself within the last few years. He had not, but he had had a

vacation with his wife, and they had gotten up at dawn to see a sunrise, a thought which Kyle found pleasant. Nervous as I was to introduce drawing to a man dressed in an Armani suit, I suggested (in an induction prior to the first movement of the Dvorak String Serenade, Opus 22,) that Kyle recall the memory of him and his wife watching the sunrise; and that he draw the experience on the page in front of him. As the music started, I could see he was self-conscious about the idea of drawing a picture. After about a minute of hectic illustrating, Kyle relaxed. With the pace of his drawing slowed down, his arms began moving every once in a while with the rhythm of the music. Listening deeply, he allowed the beauty of the music to shape what he was drawing. I played the piece over and over again. Rolling up his starched, monogrammed, white shirt Kyle proceeded to get it filthy with all the colors of the chalk he used – without any concern to his previously immaculate garb. He used pastel colors, putting them on the page and then using his hands to blend them together. When he had covered the entire page and it seemed that he was finished I stopped the music. He was transformed, totally at ease and comfortable; the music and the drawing having created some kind of positive womb-like experience. I did not really know how to verbally process what had just occurred, but, speaking slowly, I asked him to describe his experience. He expressed that he had felt “focused,” “involved,” and “creative” while he was drawing. He had tried, he confessed, to draw the sunrise in a literal way, but let go of that goal in favor of just expressing the feelings of the sunrise. He expressed gratitude that there were “no interruptions,” unlike the interruptions that flooded his daily life (by which he meant his obsessive, depressive, fleeting thoughts). He was able to truly relax and enjoy the music. For the first time, Kyle had made contact with positive feelings in a session. He did so by initially recalling the memory of a sunrise as a visual image. Then, the music helped him to focus him on the memory; and the simplicity and aesthetic beauty of the Dvorak *Serenade* held him in the image and called forth, into the present, the true and positive feelings contained within that image. The repetition of the movement (which I played for him four times) allowed the positive feelings that had emerged to gain strength. Kyle’s state of consciousness had totally transformed from the beginning of the session when he entered feeling “pressured, left over from work” to “content.” This change held throughout our discussion and continued until the end of the session. He titled his drawing: “Contentment.”

Kyle was pleased with the results of this session, and came back to the next session with a positive attitude about the therapy. I continued to use the same format each week: an induction

(usually positive) tied to the task of drawing, with classical music. These included the following drawings: “Trying to blend chaos and pleasantness,” “Father and son dolphins, frolicking,” “Let it go (anger),” “In touch.” Within two months of our work together, Kyle found that he was capable of establishing contact with positive resources (positive feelings) within himself. He described himself changing in his everyday life; finding focus, presence, openness, acceptance, hope, availability, relaxation, and contentment.

The combination of music and drawing allowed Kyle to discover a state of consciousness that was unattached to his usual psychological patterns. During the music he was able to free himself from the omnipresent levels of defenses that otherwise plagued his every waking hour: the negative parental introjects, his depressive feelings, and his existential fear of death. Kyle’s weekly “immersion” in a positive, healthy state with music began to free his psyche from psychologically debilitating defenses. Though these symptoms would always return, little by little Kyle generalized parts of this healthy state of consciousness into his daily life. He reported to me that he felt the quality of his daily life changing; but the therapy had not adequately addressed his general anxiety or work related problems.

Building momentum on the positive gains of these initial supportive music and imagery sessions, we entered into a new phase of therapy in which re-educative music and imagery sessions would sharpen his focus so that he could address his lingering malaise. Subsequent sessions produced a plethora of drawings, drawings which he titled, for example: “Locked in depression,” “Sadness, trapped inside the anger,” “Distance from dad.”

In session twenty, he reported that he was able to emotionally empathize with a patient who told him about her divorce. He experienced – for the first time in his life that he ever remembered – really feeling what he knew were normal feelings of compassion for another person, not the professional artificial compassion which he employed only as a tool in his trade. The supportive music and imagery sessions in which Kyle was in touch with positive feelings, repeatedly, though in his internal imagining had crossed over into the real world and had really begun to take hold. He was developing a constant positive internal object, the beginnings of a healthy ego, previously absent due to his parents’ abusive, and inconsistent, nurturance. The repetition of internal visits to his positive core with classical music had taught his psyche about positive feelings, and was beginning to take root outside the session, even with people outside

his immediate family. For the first time, he reported, he had had been able to make a truly human connection with a patient, an amazing confession – coming as it did – from a physician.

Kyle's therapy was lengthy, nearly once a week for three years, but he had changed himself successfully. Initially, his inner life was fragmented. Any time he had closed his eyes he was inundated with negative images, images of death and hopelessness. Immersing Kyle in his symptoms while playing music had availed him nothing, in fact, had exacerbated his distress. Neither had positive inductions with light repetitive music offered surcease from the horror because he did not have the ego strength to utilize the positive imagery he generated, until I had added the external task (in Kyle's case, drawing) to enable him to successfully hold the positive experience and assimilate it.

Traveling into the inner world is like taking a trip to a foreign country. We experience the equivalent of a different culture with an often perplexing and inscrutable set of rules. The language of this alien mindscape is the language of imagery. Kyle's internal landscape was filled with intractably dangerous places. The familiar places, which are familiar to all cultures, the safe haven of the home and the nurturing family were hidden, inaccessible. Kyle's internal world was in the midst of a civil war, when even home is unsafe.

There are three different routes through this alien inner world: 1) supportive music and imagery, 2) re-educative music and imagery, and 3) reconstructive music and imagery (GIM) [These levels conform with Wheeler's (1983) established schema of levels of therapeutic practice.] A GIM session is akin to touring a foreign country with no predetermined plan or destination; but rather in a free, meandering way. The visit unfolds spontaneously. The direction of the visitors' tour is determined solely by the experiences at hand – one experience points to the next, like free association. In Kyle's case, employing GIM, as I did initially, was unwise. Tourists do not fare well, generally, meandering unawares in foreign lands in the midst of internecine strife. Even the altruistic medical workers of "Doctors Without Borders" need safe places to retreat to when the fighting becomes intense, and Kyle had no knowledge of where to find refuge when we first began GIM.

There are several prerequisites to using GIM. The client must be able to produce imagery (visual imagery, feelings, body sensations, etc) when listening to music, able to describe verbally the imagery as well as understand symbolic images. The client must be able to apply the images to positively affect his external (daily) life (Summer, 1988). If the prerequisites are present the

therapist should be able to see positive changes in the client's life, assimilation of what he learned during GIM. Likewise, success in GIM implies that the client returns from his internal voyage changed, and changed for the better. Because GIM is so free and unstructured it is necessary to be prepared to utilize lighter, more structured approaches with music and imagery instead of GIM, as I realized I needed to employ with Kyle.

Kyle, unable to maneuver in his internal world on his own to reach positive experiences, would drown in conflict when first I threw him into the deep waters of GIM. Supportive music and imagery taught him to travel to positive internal sites. For many months, after I recognized my error of too quickly tossing him into GIM, Kyle went, through the medium of supportive music and imagery to visit positive experiences and then, once he had been able to establish within himself that lost feeling of safety, a positive healthy ego, he could finally venture forth into the conflictual waters of re-educative music and imagery.

### **Case Study: Stan – A Re-educative Music and Imagery Session**

“Those living beings who  
Know not the root of suffering,  
Cling to the condition of suffering,  
Unable to leave it even for a moment.”

– from a Mahayana parable contained in *The Lotus of the Wonderful Law*

Stan, a forty five year old physician had a dynamic but aloof personality. In our initial sessions, he was very withholding, withdrawn, and tentative. Hesitant even to say that anything was wrong with his life, I found it difficult to empathize with him. I think if I had not pushed him, he would have come in every week and told me that everything was just fine. Like Kyle, with whom he shared a profession, Stan was depressed, though less so than Kyle. Whereas Kyle had obsessions, Stan had an anxiety disorder. Stan's therapist had treated his depression with medication and approximately six months of verbal therapy. Once the therapist had reached an impasse, rather than prescribing additional medication, Stan was referred to me. A recovering alcoholic, Stan had not had a drink for ten years.

Raised by a highly critical father who had rejected him his whole life, called him a “misfit,” and who ridiculed him for any feelings he expressed and any decisions he made, I could understand how Stan had hidden his whole character so as not to “burden” his father with it. Contrarily, his mother had brought him up with much warmth and nurturing. His father was very “absent” in his upbringing, but his mother spent much time with him, playing spontaneously, and

allowing him space to express himself. She suggested that he write stories, play fantasy games, and the like; but Stan repressed this expressive component of his childhood due to a series of tragic deaths in his life.

At eight years of age, his grandmother, who had lived in Stan's house, bedridden and sick for a year, passed away. Ten years later, while Stan, a teenager, still benefited from her loving care, his mother succumbed to cancer. Shortly thereafter, Stan married. Three years later, following his twenty-first birthday, his father died from complications brought on by asthma and, probably, alcoholism. At the same time that his father was buried, Stan's young wife was diagnosed with cancer. She died shortly thereafter. Stan was barely twenty-two years old. Stan had prolonged periods of high anxiety following these brutal losses, and though there was currently no real-world parallel for these early traumas, Stan had severe anxiety even now.

"I can't even imagine being anxiety free; it is like a security blanket to me," Stan told me. "I'm still afraid of everything: of failure at work, or at anything I do. I am afraid that my dog will get lost, that there will be a hurricane. I make up worst-case scenarios in my mind every day, all day, about imaginary things. . . I think anxiety is my attempt to control external events, even though I know rationally that they can't be controlled."

In our first sessions I determined that Stan's ability to travel in his internal world was very good. The initial phase of therapy contained a mix of sessions – some were supportive, some re-educative, and a few were reconstructive. The supportive sessions helped him to reconnect with the positive core of his childhood and the period of his life immediately prior to the series of deaths – when he was in college. His college years were the time of his life when he felt most a sense of direction and meaning in his life, and when he experienced joy in the relationships he had. Several supportive sessions helped Stan begin to connect with his positive core, and these sessions led to an intense GIM session. This session began with Stan's telling of a dream that disturbed him and elicited enormous feelings of anxiety. I used part of his dream as an induction, and suggested that he explore the dream's anxiety. The music program allowed him to transform the anxiety elicited by the dream into an inner impulse that reminded him of his creative writing which had been nurtured by his mother in his childhood. After this session his positive sense of self increased significantly. He took out a novel he had begun writing in college (and had put away), bought a computer, and began to write again, every day after work. Another GIM session took him to explore one of the roots of his anxiety: he revisited his father's

deathbed. His daily anxiety reduced somewhat after this session. He began to listen to music in his daily life, a pastime he had neglected since his youth when he listened to music every day. He purchased classical music recordings, and reacquainted himself with music that he had not listened to since his college years. His first comments in most sessions were about the classical music utilized in the previous session - how beautiful it was and how strongly he had been affected by it.

By session fourteen Stan had developed a positive, working relationship with his inner world; and had begun to generalize into his life aspects of his positive core. His exploration of the unconscious roots of his anxiety had somewhat lessened its hold on his daily life. Session fourteen, a re-educative music and imagery session was a key session in helping Stan to gain a truly new perspective in regard dealing with his anxiety on a day-to-day basis.

In the prelude, I asked him to close his eyes and rather than *think* about his anxiety, to allow himself to *feel* it. Agreeing, he closed his eyes and began to describe his imagery, prior to my beginning the music program. “I see a picture of a pile of solid objects, all turned differently. It’s a mix of objects, different sizes. Actually, it is like a bowl of jewels and I feel very drawn to them. . . I wish they weren’t so attractive because I have to focus on them. . . I really feel an attraction to them. It looks like a picture – something that a child has drawn – it’s not real, it’s like a photograph, I can look at it from different sides, but I can’t get at it. . . It’s two dimensional.”

Allowing Stan to establish a solid visual image of his anxiety, before I started the music, facilitated the goal of the re-educative music and imagery session, viz: to help Stan gain new perspectives on his anxiety. The function of the music being to keep the client focused upon an image in order to work with it in some way, the Faure *Pavanne*, with its simple, arpeggiated accompaniment, helped to keep Stan from drifting away from the imagery of the jewels. The *Pavanne*’s accompaniment is all pizzicato, which seemed to match the static and separate nature of the bowl of jewels. A flowing, simple flute melody brought some forward motion to the process, and the contrast between the repeated A and B sections provided stimulation to view the image from a different perspective. His immediate response to the opening measures of the music was to say: “Now the jewels aren’t so static and drawn, there is movement between them.” As the slow procession of the Faure played out, Stan reported, “It’s like someone is sifting them (the jewels). They are moving up and down, there is some friction between them, but it is a

natural process. They are a part of nature; different things happen to them – rain, floods, snow – there is some kind of nobility about it. They are impervious to those forces; they don't change, they just stay the same. Things act on them; I feel some sadness.” The image was clearly moving from its initial stasis, taking on a duality – moving; yet impervious.

For the next musical selection in this session, I chose Warlock's *Pieds en l'Air*, a very short piece, in a lilting  $\frac{3}{4}$  meter; very repetitive, but with much more fluid movement than the Faure. I was matching the new quality that had appeared – movement – because I wanted to reinforce it; but I did not want to introduce too much tension. With the Warlock, Stan reported, “This is a lighter piece, it brings out the colors in the jewels. I'm looking at them in a new light. These aren't just problems, they are elements. A jewel is actually a rock; this shows the rocks. They look different in different light. If the light is taken away, you would only see limited pieces. It's kind of like looking at stars, everything else is dark. . . Oh, these are my issues, I feel them as anxieties.”

Next I chose the “Air” movement from Grieg's *Holberg Suite*. Stan had been focused on one image for two pieces, and the jewels had progressed from an unfeeling, two-dimensional visual apparition, to an emotionally connected experience. At first he would not own the image of his anxiety – noting that it appeared to have been drawn by someone else; and therefore, he believed, he could not get to it. With the impetus from the “Air” Stan was able to more thoroughly possess the image – attributing psychological meaning to it. His perspective about “jewels” shifted somewhat also when he acknowledged that jewels were simply and naturally: “rocks.” He opened up to a more visceral feeling of the image, as well. (I could also perceive the appearance of feelings in his voice, his face and his physical responses to the music.) This movement from Grieg has a musical home base that is filled with much more tension than the two previous pieces – this was to be the “working” piece of this session – and was to match the tension that was building. Similar to the other two pieces, the Grieg has a solid, repetitive accompaniment throughout almost the whole piece which is very useful for re-educative music and imagery. However, the piece is much tenser harmonically, and has a more complex development. Stan commented, “These are pieces of me, and I can look at them with a different light. The light hits the edge of one stone, and makes a glare. It is so bright that I can't see the others. This brings tension because it puts an emphasis on one of the stones. I'm trying to perceive the others with my other senses. Some are more visual; some, I imagine feeling, the



others, hearing. I need to use my other senses, I have to make the effort. It's a good thing – they all should be noticed.”

The therapeutic process for Stan expanded from a visual symbolic image to one that encompassed other senses, and most importantly: his feelings. The expansion evoked a new relationship for Stan with his anxiety. Armed with this increased apprehension, he was able to confront his anxiety instead of seeing it as separate and unconnected to him. “I’m trying. . . I have to make the effort... it’s a good thing.”

The second movement of the Albinoni Oboe Concerto in D major has a very different musical language, from the romantic tone of the Faure, Warlock, and Grieg. Most notably, it is baroque, and the prominent use of harpsichord differentiates it in timbre as well, from the previous three. (It is superficially similar to the Faure *Pavane* in its use of a staccato accompaniment with a fluid woodwind melody over it, but it is much more grounded and richer than the Faure.) My intention in choosing this piece next in the session was to bring the imagery to a close, because Stan had done enough therapeutic work by accepting, on a feeling level, his anxiety. This was enough, I thought, for one session, but Stan was not finished, and continued to work with his previously developed imagery. The more rigorously structured music of the Albinoni compelled Stan to respond with a defensive impulse to “organize” his feeling of anxiety, rather than simply to accept it. “Now, I’m trying to organize them,” he said of the jewels as the baroque selection began. Nevertheless, he immediately returned to his former perspective, remarking, “but no, they can’t be laid in rows. They must be in a mass.” He continued, “More than one stone catches the light. There is a harmony that there wasn’t before. All the facets face a certain direction. The light moves across them, and shows some similarity among the stones. The light makes them more beautiful. It is still sad, they are bits of sadness and anxiety. . . The light moving on them shows me the similarities . . They are visually disorganized, but I can see the harmony between them. It’s an expression of nature; elemental, fundamental. It’s still complicated, but more elemental; not unnatural. I feel I should embrace and welcome them. They are so fundamental. . .” I decided to play the Albinoni movement again, as I did not want to immediately curtail Stan’s passionate and sincere narration of his imagery. “They are pieces of nature; they are fundamental. It is a mystery, that’s part of the tension. As the light moves, I can see different colors. I can’t predict what color will be next, and I can’t see them all, but it’s

natural. It comes from the nature of the object. There is light in the stones; there is inherent tension and mystery; it's okay for it to be there. That's a good thing."

In our postlude, Stan expressed to me that he understood that it was alright to be anxious, that anxiety is to be expected, that it is natural. "In my image, the stones are meant to be attractive and mysterious," Stan explained to me. "It's an inherent property of the substance. Judging them is like judging water for being wet." Thus Stan showed he was prepared now to reconcile himself with his anxieties, accept them as having value; rather than run from them with fear and anger as he was wont to do previously.

Stan's initial imagery of haphazardly organized jewels in a bowl was imbued with feelings of natural beauty, "nobility," (as he termed it,) and appreciation through the application of the music program. The tension in the music became identified with the tension inherent in the image of the jewels and once this isomorphism was established, Stan transferred properties of the music (beauty, clarity, aesthetic quality) to his internal struggle. This isomorphic relationship allowed Stan to accept his inner tension as beautiful, acceptable and natural; just as the tension in the music is beautiful, acceptable, and natural. The music did not alter Stan's imagery. The singular image of the bowl of jewels remained constant throughout the playing of four different pieces of music. But the music did alter Stan's *relationship* to the image. (Note that in reconstructive music and imagery the music *does* change the imagery.) Stan's initial acknowledgment of his anxiety, prior to treatment, was not a truly felt acceptance of it; as evidenced by his initial image (it was lifeless, "not real" – a drawing) and his distance from the image, emotionally (it was two-dimensional and was *someone else's* drawing). Acceptance came when Stan changed his view about the bowl of jewels, as made evident in his finding "harmony" in the arrangement of jewels. "It's an expression of nature; elemental, fundamental. It's complicated, but not unnatural."

The music had helped Stan metamorphose his abstract angst into an aesthetically attractive image with which he was comfortable. On the surface, it may appear odd to suggest that it was a positive result for Stan to accept his anxiety. After all the goal of our therapy was to alleviate anxiety, not simply accept it, but this acceptance, and its healthy baggage of new insights and perspective, is prerequisite to amelioration. This re-educative music and imagery session allowed Stan to move from denial to acceptance.

In effective re-educative music and imagery the therapist brings matching pieces of music to bear on a problem with the aim to stimulate within the client a new perspective, which can be made useable in daily life. To this day, Stan continues to use imagery developed in our re-educative music and imagery sessions to confront issues. Recently, for example, he returned to the jewel imagery when he experienced anxiety over a major financial decision. But, if the therapeutic goal is to actually permanently ameliorate the client's symptom, reconstructive music and imagery is called for.

### **Case Study: Bebe – A Reconstructive Music and Imagery (GIM) Session**

“Long have I borne much, mad thy faults me make;  
Dishonest Love, my wearied breast forsake!  
Now have I freed myself and fled the chain,  
And what I have borne, shame to bear again.”

– from the *Elegies* of Ovid, as translated by Christopher Marlowe

Sleepless in the tropics, Bebe, a woman just beginning her third decade, had first asked her physician for help with her insomnia. Her doctor, realizing that her sleeplessness was but one symptom of an emotional disturbance, referred her to a therapist. During seven months of verbal therapy it became evident that Bebe suffered from depression and that her boyfriend, Eric, with whom she had been living for seven years, was emotionally abusing her. She felt hopeless and helpless to cope with her feelings and with Eric. This became a central focus of her discussions with her therapist. In four months of therapy, Bebe had learned that her symptoms of depression matched those she had had at the age of sixteen when her brother, Kenny, had died. Aware of the necessity of addressing her depression and articulating clearly her recognition that she must extract herself from her relationship with Eric; she, nevertheless could not begin the exigent task of separating from her continuously abusive lover. She was fearful about the loneliness she felt would envelop her if she did. Weeks became months, and still, she could not leave. The excuses she enunciated for this failure to act encompassed her dread of loneliness, financial insecurity, and her misperception that there were “no other men out there.” Obsessive and irrelevant thoughts about Eric also thwarted her. She expressed anxiety and indignation over the thought that if she were to leave Eric, he would continue with his life “like nothing happened.” She rankled with jealous rage over her thoughts of him with another woman. Her primary therapist was of the opinion that Bebe's resistance to leaving Eric was rooted in her unresolved feelings of loss from her brother's death. Kenny had been the closest person to her in the world, her best

friend. Bebe was extremely devoted to Kenny, and despite the fact that Kenny's death did not come suddenly – he had died following a long illness – she still felt unprepared, and had difficulty allowing herself to mourn for him. Her family had become fragmented during Kenny's drawn out death, and had been unable to come back together even to mourn the immense mutual loss. She felt unsupported by them. They were not sympathetic with her feelings of helplessness, hopelessness, and loneliness; all normal reactions to the death of a loved one. Though she was only sixteen at the time of her younger brother's death, she left home. Bebe's therapist conjectured that this "geographical cure" for her feelings had left unresolved the feelings of depression she had at this time and that this was at the heart of her inability to leave Eric. Her fear of being alone, preferring abuse over the unknown future, stemmed from her feelings of abandonment when she was sixteen. Stuck as she was in this quagmire, her therapist did not believe medication was an answer for her client's predicament; and so after seven months of verbal therapy, Bebe was referred to me for music psychotherapy.

Bebe, stunningly elegant, well dressed, well spoken, strong, competent, quick thinking, and engaging when I met her, shocked me with her revelations about her emotionally abusive boyfriend. He persistently humiliated her, privately and in public; for example: making sexual advances to other women in front of her. After reviewing the facts of her case, we embarked on a series of music and imagery sessions that helped her to mourn the loss of her brother.

This accomplished, I felt that she was ready to address, head on, her current state of depression. In the prelude of our fifth session following the three successful GIM sessions and one joint verbal session with her primary therapist, I asked her to close her eyes and allow herself to delve into the feelings of depression she was having – to not resist them – and describe them to me. She said, "I just feel down . . . The feeling is sinking, desolate, hopeless, there's nothing to do, but I feel safe. I notice that I feel some fear. . . It's like a knot in my stomach." I challenged her to stay with the feelings of depression – to not reject or try to deny them; or fix them up in any way – and to allow the music to bring her an image of her depression; so that she could travel more fully into the feelings. I played for her Stokowski's orchestral arrangement of the Bach *Passacaglia and Fugue in C*, BWV582; followed by Bach's, *Come Sweet Death*, BWV487, and the "Sarabande" movement from the Bach *Violin Partita in B*, BWV1002. Bebe described her imagery.

“There is a basement in New York. . . It’s dingy, depressing, there are lots of cockroaches, and it’s cold outside. . . How could anyone live there? It’s a basement, there are no windows, it smells, it’s very depressing. There is a painted door on the apartment and the music is opening the door. There is an old lady there, she’s an invalid, she looks terrible, she has a sad face, she’s wearing an old cardigan. She’s sad and abandoned.” At this point in her imagery, Bebe cried for several minutes. I encouraged her to “let the tears come,” and the crying built to a peak before finally receding. This was her first extended emotional catharsis in our therapy.

She continued narrating her imagery as the Bach program played on. Further contemplating the image of the “old lady, she said, “I’m so sad for her, my tears are warm, though. This is like watching a sad movie. . . She sits, the clock ticks, no one loves her or thinks of her. I ask her how she is, but she doesn’t even respond to me,” she said. I asked her what the music suggested to her. “I am going to hold her hand – yes, that is comforting, it gives her comfort. Her hand is dried up and rough; she’s a little old lady, and this feels nice, it’s good. Oh, her name is Sheila and she wants to go for a walk. She’d like it if I take her outside. It’s sunshiny but cold. We chat, she likes this – its uplifting – someone cares about her. We’re having a cup of tea. . . I buy her flowers, we are watching the people in the park. It’s comfortable. She is happy, glad to be outside; she doesn’t want to go back to her apartment. It’s dismal and lonely. In the apartment she just eats, watches TV, and wonders how come no one knocks on the door. The TV and food comfort her, but she is still very lonely. I feel sad for her.” Responding to this imagined empathy for the symbolic figure of the elderly woman, I asked Bebe to say what Sheila needed. “She needs me to visit her, take her to the hairdresser, to the movies, to visit others her own age in the park. . . on a regular basis. She just needs a helping hand and she’ll be okay.”

As the music ended, Bebe said, “Now (Sheila is) not so desolate, she has some hope, energy, she’ll take care of herself, clean up, and think of herself. She won’t always feel good, but she is more relaxed, softer.” Bebe’s imagery immediately affected her life after the session. She was feeling stronger, and hopeful. “I’m still anxious, but I am ready to fly and I feel open to the future,” she told me. She was able to imagine, she reported, having left Eric and saying no if and when he asked her to return to him. She said, “I feel drained, but relaxed, and I know what I have to do.” Indeed, she conceived of a plan that would help her leave Eric; she decided to enroll

in a six month educational program in the continental United States that she had been thinking of attending for some time.

Reflecting on this powerful and transformative GIM session later, I surmised that the invented “Sheila” was a symbol of Bebe’s depression, which had been unwanted, rejected, and hidden away from her own self since her brother’s death. Sheila was, in a sense, waiting for the return of Kenny. Sheila needed to take action, to move from the stasis in which she wallowed, and now Bebe was able to take her by the hand, and, figuratively fix Sheila’ life. In this session, when the tension of the opening musical material, the Bach *Passacaglia and Fugue*, matched the diffuse tension of Bebe’s depressive feelings, and stimulated a specific image of her depression (Sheila); the music brought an aesthetic beauty to the Sheila image (which represented Bebe’s depression) and made Bebe’s feelings of sadness approachable and bearable. Bebe was able to examine and appreciate her sadness rather than reject it. As she cried with the music, she was, finally, accepting of the sadness. In GIM, clients push beyond acceptance and begin true transformation. The music evoked the image of the dingy apartment (“there are no windows, it smells, it’s very depressing”) and the dingy old woman (“she’s an invalid, she looks terrible, she has a sad face,”) but once it did so, the music actually metamorphosed the image, (“I am going to hold her hand . . . She’d like it if I take her outside . . . She’s a little old lady, and this feels nice, it’s good,”) and in doing so, also metamorphosed her depression. “Now (Sheila is) not so desolate, she has some hope, energy, she’ll take care of herself, clean up, and think of herself.”

As the music developed and changed, it brought fluidity, movement, and healthful processes to bear against the sadness, the image of Sheila. Even the locale changed as Bebe decided to take Sheila out to the hairdresser (improved self-image), the movies (ability to enjoy the excitement of life’s dramas), and the park (ability to enjoy the world, and life in general). The music activated Bebe’s positive internal strength (the part of her that could take care of Sheila) in order to take positive action in her own real life. The solution that the music brought was to hold Sheila’s hand and thus to connect with her sadness, accepting it unconditionally – not to judge Sheila as ugly, meaningless or in any way undeserving of hand holding nurturance and care – and to take action (a walk) to get her into the “light.” Bebe’s image of herself symbolized her own, positive, internal strength. The transformation of Sheila was the key to changing Bebe’s inner life from one of depression and passivity to one of enjoyment and hope.

With such an emotionally and symbolically powerful session accomplished, the application of the Sheila imagery transformation to her daily life would come very easily.

We spent the next session exploring the levels of meaning in the imagery, as well as discussing her plan to separate from Eric. I was very attached to my own interpretation of this session and I was surprised that Bebe's interpretation of the symbols of Sheila and herself were different from mine. But, her interpretation is what we discussed, not mine, which remained unspoken. In GIM the therapist does not interpret the imagery to the client; the client must glean her own meaning of the imagery. Bebe saw Sheila as a symbol of herself. She (Sheila) had been scared, needy, and sad. The image Bebe had named "Bebe" in the previous session, she determined represented Eric, the person she had been reaching out to as her sole comfort. She felt that "Sheila" was trying to avoid her internal feelings of sadness by relying on the diversion of socializing with another person, "Bebe" in her imagery. Contrary to my interpretation, she felt that the imagery was directing her to get out and be with her peers. She recalled from her previous session the advice she felt Sheila should heed, *videlicet*: "She needs. . . to visit others her own age," which she interpreted as meaning to stop depending upon Eric, or anyone else to save herself, and to therefore leave her current life in order to make a new one. After seven more sessions (two of which were in tandem with her verbal therapist) Bebe left for school and told Eric that their relationship was over.

### **Summary: The Three Levels of Music and Imagery**

The specific GIM procedures that I used with Bebe were designed by Helen Bonny. In the early 1970's at the Maryland Psychiatric Research Center and the Institute for Consciousness and Music, she created these specific procedures for an in-depth music listening session and called it Guided Imagery and Music (GIM; also called the Bonny Method of GIM).

Rather than holding the client at a singular destination, it works through broad-based, free exploration of the unconscious. To achieve this, GIM utilizes an altered state of consciousness, with an open-ended induction paired with evocative classical music. Sessions unfold as the music suggests; but the suggestion is subjective and individual clients hear the suggestion in a myriad of ways. The musical selections alternate between tension and restfulness, complexity and simplicity. The "traveler" reflects the duality, exploring conflictual areas during the evocative, complex pieces; and returning "home" to positive resources during the simpler pieces. Bonny also created a series of eighteen music programs which are utilized in the Bonny Method

of GIM. (To employ the technique correctly and safely, it is necessary to have taken a three year graduate or post-graduate training in GIM.)

GIM centers upon the client's experience of listening deeply to a program of music. The therapist encourages the client to describe his internal experience (thoughts, feelings, images) in order to make it more real or vivid. Once the music brings images and feelings of tension, the therapist guides the client to listen deeply to the music, since it contains patterns of tension and release that the client translates into psychological solutions for his problems. The music program in Bebe's session spontaneously transformed Sheila from her state of depressed isolation into an active, functioning woman.

Supportive and re-educative music and imagery significantly improved Kyle's and Stan's life while they were in therapy by reducing their symptoms and giving them an increased healthy repertoire of responses to life events. These levels of music and imagery are more "cognitive," and do not bring long lasting, life altering change. The key difference in the reconstructive level is how immediately and permanently a symptom can be changed while listening to evocative classical music. Whereas using repetitive music in Kyle's session helped to hold him in his symptom and gain a new perspective in regard his symptom (*not* to change it), in a GIM session the complexity of the musical material and its development serves to act upon the image and transform it. It also changes the feelings that are contained within the image (when Sheila felt better, so did Bebe). Once the music effects this symbolic transformation, it is easily generalized into real life. After only twelve sessions, Bebe's reconstructive therapy transformed her inner life and her external life. It aligned her internal and external worlds and thus facilitated her approach towards self-actualization.

Each level of practice in music imagery – supportive, re-educative, and reconstructive – is concerned with addressing the emotional limitations that brought the client into therapy; each uses a different approach to these limitations. Kyle's internal and external world was filled with symptoms that were unmanageable and rigidly fixed; his distance from everyone had caused his relationships to be devoid of feeling, his character to be devoid of depth, and his life to be devoid of meaning. Supportive music and imagery served to circumvent his symptom in order to connect him with positive resources lying dormant in his internal world. Using positive inductions paired with simple, repetitive music with little tension, Kyle was able to develop compassionate responses within the therapy sessions that were then made useable in his real life



– both with his patients and family. For Kyle, supportive music and imagery therapy yielded a greater repertoire of positive internal responses to life, instead of the ingrained negative ones.

Stan came to therapy wanting to reduce his anxiety disorder, but psychologically unready to do so. Re-educative music and imagery served to help him face, accept, and gain new perspectives on his anxiety. Using simple inductions focused upon his symptoms paired with music that contained some harmonic tension and some development, Stan was "re-educated" and gained a different attitude towards his anxiety. For Stan, re-educative music and imagery therapy yielded a new perspective which reduced his anxiety and its effects on his daily life.

Bebe came to music and imagery therapy with a goal: to leave her abusive boyfriend, but without the ability to move towards her goal because of her depression. Reconstructive music and imagery uprooted her depressive symptoms at their core in the unconscious. Using an altered state of consciousness, with open-ended inductions paired with a program of complex, evocative classical music, Bebe was "reconstructed" when her unhealthy image was transformed into a healthier one, freed of depressive symptoms. For Bebe, reconstructive music and imagery therapy yielded a dramatic escape from her depression (a depression rooted in her brother's death) and transformed Bebe's responses to life from passive acceptance to action.

### References

- Bonny, H.L. (2002). *Music and consciousness: The evolution of guided imagery and music* (L. Summer, Ed.). Gilsum, NH: Barcelona Publishers.
- Summer, L. (1988). *Guided imagery and music in the institutional setting*. St. Louis, MO: MMB Music, Inc.
- Wheeler, B. (1983). A psychotherapeutic classification of music therapy practices: A continuum of procedures. *Music Therapy Perspectives*, 1(2), 8-12.

---

### 1.7. Transition from publications to research study

The first four publications reveal the central theme of theorizing about how music serves as the primary therapist within the configuration of the therapeutic triad in music therapy: client, therapist, music. The final two publications chronicle the main modifications of the Bonny Method of Guided Imagery and Music (hereafter referred to as BMGIM) that I developed through years of clinical practice with adults diagnosed with mood, addiction, and anxiety disorders as well as "well" adults. The emphasis on a music-centered approach and on modifying

BMGIM for specific client needs has been combined into the clinical protocol of the study, which is a music-centered GIM session.

Each of the six publications is written from my perspective and details my understanding of the role of classical music within the GIM process. The development of music-centered Guided Imagery and Music (hereafter referred to as MCGIM) is an outcome of clinical responsiveness to the clinical needs of my clients. Yet, its development is an expression of my understanding, not theirs. My publications express my perspectives, but my clients have had no direct voice in these publications. What is their perspective? How do my clients experience the music within a GIM session? This question led to this study's design: a qualitative interview process which would permit an expanded narrative expression of the client experience of music in a GIM session. The purpose of the study is to examine the client perspective of music-centered GIM in order to broaden my understanding of the music experience.

## Chapter 2: Introduction

This chapter introduces music-centered Guided Imagery and Music. Section 2.1 explains how the method was developed in my clinical practice, section 2.2 defines the method and its relation to the Bonny Method for GIM; in addition, the two modifications: repeated music and music-centered guiding are described. Section 2.3 concludes the chapter with the research questions for the research study.

### 2.1. Development of music-centered GIM

The development of the topic for this research study required, in addition to a review of the six publications in Chapter 1, a review of my clinical practice. For this review, I conducted a comprehensive examination of session transcripts from 1992 until the present, excluding all sessions utilizing music and imagery techniques that did not fit the parameters of Guided Imagery and Music (see section 2.2 for definition). For example, sessions in which there was no guiding of imagery and where the client completed a drawing during the music program were eliminated. The study of two session transcripts, one with a client, “L,” and one with a client, “D,” helped me select and design the exact clinical protocol for this study’s GIM session.

L, an experienced GIM client, arrived at the session with a metaphor for the state of her spiritual life: she was just a door away from some kind of deeply spiritual experience. Her image was of a “spiritual waiting room;” in a line, getting closer and closer to the door, but despite this closeness she became stuck as she approached the door. “Maybe it’s too much to open the door – if there is too much light, I will die. I am unsure of my place in line.” Moreover, she felt emotionally unable to risk opening this spiritual door and hence, she was totally paralyzed in her position. Taking a humanistic position, I did not want to solve this problem for L, nor did L feel she had the inner resources to discover what to do about this stuck position. Both L and I could only envision two solutions: risk opening the door or not. The first was impossible from her stuck position, the second unacceptable to her.

As L described herself in the waiting room, I played the Beethoven *Seventh Symphony, movement 2* to meet and match the tension of her emotional state. I hoped that the opening material of this movement with its simple melody which is stated, at first quietly, then presented repeatedly with increased intensity (added orchestration, volume, embellishments, and countermelodies) would reflect the gravity and “stuckness” of the waiting room image. I repeated the Beethoven movement over and over again and used a music-centered guiding

strategy. The music held her in her tension for three repetitions, and during the fourth repetition of the movement she created a responsive conversation with the music and immediately following, her experience of the music changed. She began to experience the music as a network woven together with many invisible networks underneath it. “Even if you fall through there is this invisible network. On the level of spiritual connectedness it is absolute containing. “It’s something eternal, an invisible matrix.” In the postlude L reported that the music had gradually brought her to a deeply spiritual experience of the basic nature of the universe.

This session stood out to me because it was the first time I had ever repeated one piece of classical music five times. My decision to repeat the Beethoven movement was probably based on a metaphorical understanding that the repetition of music is analogous to the feeling of being stuck. It brought L an answer to her spiritual dilemma. It amazed me that although L was hearing the same Beethoven movement over and over again, instead of hearing it in the same way, it was clear that she heard something new in the music with each repeated hearing. Instead of acclimating to the listening experience, it was as if she was able to notice more about it with each repeated hearing. It seemed that she was hearing more deeply into, or hearing afresh, the musical material.

For L, this process of hearing afresh had helped to achieve the main goal of GIM as derived from humanistic psychotherapy: helping the client to find a reconstructive solution (either psychological or spiritual) to life’s dilemmas within her. In humanistic psychotherapy, rather than answer the client’s questions, the therapist simply reflects the client’s questions back to her in different ways to allow the client to discover her own answer (Maslow, 1968). The humanistic music therapist uses music to reflect the client’s problem back to her. When the tension of the client’s problem is reflected within the music as ambiguous aesthetic tension the music then takes on the possibility of becoming an intermediate helper for the client, as Beethoven’s *Seventh Symphony* did for L when she discovered the solution to her problem through her music experience.

The second session that impacted the clinical protocol for the study was with D, a client who was addressing crucial life issues regarding his work and family. He was referred to music psychotherapy by his verbal psychotherapist with a request to me that the music help him to “break through his strong intellectual defenses.” While listening to the Bach *Little Fugue in g minor* (BWV 578) in a GIM session, D began to describe the music as music. Rather than ask

him to notice his responses to the music which would thereby favor the focus on his internal world, I stayed with his initial focus upon the music itself. In response, D described the music as he heard it. He said that each entrance added another complexity to the music and that no matter how much was added, it was always perfectly balanced, “it still holds together; the balance is unbelievable, it grows big and powerful; the parts play together and against each other.” The music-centered interventions prompted him to simply listen and describe the music as he heard it. I kept his attention on the music at all times in an almost insistent manner with interventions that asked about the music. This generated a moment by moment description of how D was experiencing the music. When the music concluded, the analogy of Bach’s musical development to his psychological life was perfectly lucid to him. The focus on the music had brought him a newly heard musical/psychological perspective: like the Bach Fugue, it’s possible that all the aspects of his life – wife, children, and work – could be perfectly balanced. In this session I used a specific type of music-centered guiding intervention wherein I asked the client to describe the music simply as music (i.e., what are the instruments doing?). It is perhaps an example of the most music-centered way of guiding possible. This strategy required the client to focus on the music to the exclusion of imagery and yielded a musical/psychological solution to the imbalance in his life. My decision to utilize only music-centered guiding interventions in this session was probably based upon an intuitive understanding that D was experiencing a direct metaphor for his psychological dilemma as he heard the Bach fugue, and my hope was that he would have a conscious recognition of this in the postlude of the session.

These two sessions were modifications of the Bonny Method of GIM. I used less imagery, intensified the effect of one piece of music through repetition, and emphasized the music aspects of verbal interventions in order to assure the music-centered nature of the solution for the client’s current dilemma. Whereas BMGIM is even-handed in its main ingredients, music and imagery, these two sessions were very heavy-handed and direct in regard their focus on music; hence the term music-centered GIM.

## **2.2 Definitions**

### **Bonny Method of guided imagery and music (BMGIM)**

The definition used in this study is similar to definition given by Bruscia (2002a, p. 46). The Bonny Method is an individual form of GIM that explores consciousness, e.g., in healing, psychotherapy, self-development, and spiritual work. The client listens to pre-designed programs

of classical music in an expanded state of consciousness and interacts with the therapist. The GIM therapist uses nondirective, non-analytical, music-based interventions within a client-centered orientation. The GIM session has the following components: prelude (preliminary conversation), induction, guided music-imaging experience, return, and postlude discussion. The clinical approach in this study, music-centered GIM is a modification of BMGIM.

### **Guided imagery and music (GIM)**

When a GIM Fellow changes the essential characteristics of BMGIM, the new method is considered a modification of the Bonny Method of GIM and it falls under the generic category of GIM. The generic definition of Guided Imagery and Music is “all forms of music-imaging in an expanded state of consciousness, including not only the specific individual and group forms that Bonny developed, but also all variations and modifications in those forms created by her followers. GIM is therefore the umbrella title.” (Bruscia, 2002a, p. 38). The clinical approach in this study of music-centered GIM falls within the boundaries and definition of “generic” GIM.

### **Music-centered Guided Imagery and Music**

Music-centered GIM (MCGIM) is a modification of the Bonny Method of GIM. It modifies two elements of BMGIM: music choice and guiding strategies. Music-centered GIM is characterized by 1) the use of a music program of repeated pieces of classical music (one or more pieces within the program are repeated at least once), during which 2) the client interacts with a guide who uses primarily music-centered verbal guiding interventions.

#### *Modification of the music program*

BMGIM music programs introduce the client to distinctly different pieces of classical music linked together in an “affective contour” (Bonny, 1978/2002b, p. 308). Music-centered GIM music programs do not have a pre-designed contour, rather the program is chosen spontaneously. It is characterized by the repetition of one or more pieces of classical music, repeated one or more times. The music-centered GIM music program is based on the concept of “holding” a client in one piece of music, rather than the stimulation of many pieces of music. In music-centered GIM the client experiences the same musical material over and over again. The multiple hearings of one piece of music are intended to give the client time to listen more closely to the aesthetic complexities inherent within the classical music selection. Repetition creates the opportunity for a deeper, more intimate, and more differentiated relationship with the given piece of music (see section 4.7.4 for the protocol for programming music).

### *Modification of guiding*

In a BMGIM session, verbal guiding interventions are nondirective, non-analytical, and they are broad based, in that the interventions focus on any and all elements of the client's experience including imagery, thoughts, body sensations, and experience of the music. Whereas the BMGIM guiding strategy does not favor an emphasis on any one aspect of the client's experience, music-centered GIM guiding is directive, focusing essentially on the client's experience of the music. For the purpose of this study, the guiding interventions used in music-centered GIM are called music-centered guiding interventions, and are defined as any verbal interventions during the music listening portion of a GIM session that specifically refer to the music. Examples include: "How are you experiencing the music?" "Describe the music." "Really open to the music." "Let go to the music." "Listen more deeply to the music." "What do you notice about the music?"

### **Further explanation of modifications**

Most modifications of BMGIM have been developed while practicing with clients who are contraindicated for BMGIM because of inadequate ego strength. Some GIM modifications have been developed that use shortened music programs and minimal relaxation techniques (Blake, 1994; Goldberg, 1995). Some practitioners have modified BMGIM to fit into a verbal psychotherapy practice with a fifty-minute hour structure (Vaux, 1993; Thöni, 2002), while others (Wrangsjö, 1994) keep BMGIM intact, and practice it as a method alongside verbal approaches, such as psychoanalysis. Some practitioners have modified BMGIM so significantly that these approaches may be considered outside the basic definition of GIM (supportive music and imagery: Summer, 1981, 1988, 2006; Goldberg, 1995; and re-educative music and imagery: Summer 2002, Summer & Chong, 2006). However, the clinical imperative to develop music-centered GIM was not client contraindications. Rather, it was developed in response to the needs of advanced BMGIM clients who already showed facility in the exploration of consciousness through imagery.

So what is the clinical intention of music-centered GIM? The goals of BMGIM and music-centered GIM are the same, as articulated in Bruscia's definition of BMGIM above, and both are explorations of consciousness. But, although the goal is the same, the approach of music-centered GIM is different from BMGIM. In the Bonny Method, immediate encounters with music occur, and the primary experiential emphasis is on the exploration of the imagery

experience produced by the stimulus of the music. Direct encounters with music occur naturally, passively, and/or suddenly, and not as the result of a plan. The primary clinical intention of music-centered GIM is to purposefully, dependably, and consistently create conditions within a GIM session for clients to have direct, immediate encounters with classical music.

*Repeated listening of classical music*

In music-centered GIM, repeated listening is used to allow the client time to gain a deeper hearing of a music selection, and hence to more profoundly explore and respond to the complexity inherent in the given music selection. Through trial and error in clinical practice I discovered the approach of repeating one piece of music within a regular BMGIM music program as an “alteration” of a traditional BMGIM session.

At first, my clinical intent was simply to “hold” the client in a particular image or feeling. Instead of allowing the music program to run its course, I repeated one piece of music to help the client stay in the feeling or image at hand. When I began repeating pieces of music in a BMGIM session, I discovered a side effect of this strategy; the client developed a new kind of closeness to the music. “In music, as in any relationship, intimacy is achieved through repeated opportunities for closeness” (Bonny, 1993/2002, p. 233). My impression as a GIM guide was that repeated listening helped the client focus, hear, mention, and use the music more deeply. As a result, the client seemed able to get a fuller benefit from the music. Subsequently I began to use more than one repetition of a piece of music or a repetition of two pieces during a session. Although the client was not usually aware of the repetition, nor did I discuss it, I felt that repeated listening helped the client become more fully aware of, and to more fully utilize the many subtle and therapeutic complexities inherent in the classical music.

Although repetition of pieces for the therapeutic intention of “holding” is not a practice customary to the Bonny Method, this approach is commonly practiced in improvisational music therapy and music therapy methods that use songs in which spontaneous musical repetitions are the norm. For example, a therapist “holds” the client in a particular song that is resonant with the client’s current state or issue, usually repeating the song’s musical material with spontaneous alterations or an improvisatory development of the musical material and lyrics of the song. In music-centered GIM, when a classical selection is repeated, the actual musical material is objectively exactly the same. It is not the musical material that is altered in successive hearings, but rather when the exact same musical material is repeated, it is the client’s unfolding



relationship to it that alters his experience of the music so that he hears it differently in each repetition.

### *Music-centered guiding interventions*

BMGIM guides typically use four categories of verbal guiding interventions: 1) Asking the client to describe images that arise (Client: I have come upon a beautiful sunset; Therapist: Describe the sunset); 2) Validating and deepening imagery experiences (Client: I'm watching the sunset, but I'm by myself and I feel really lonely; Therapist: Just allow yourself to be there with your feelings [validating]; Client: I'm starting to feel my loneliness as a weight on me, it's like something is pushing on my chest; Therapist: I'm going to push on your chest; really feel that weight pushing on you; allow the feelings to be there, too [deepening]); 3) Stimulating involvement (Client: The weight on my chest is like an angry child – she pushes me down and dares me to push her off me; Therapist: Let yourself respond to her pushing you down.); and 4) Re-focusing on the music (Client: I feel so sad; Therapist: Is the music with you?) (Summer, 1989a).

BMGIM practice does not usually emphasize any one category of guiding intervention. The BMGIM guide intervenes in a manner that is completely client-centered; the guide uses the intervention that is appropriate to the specific imagery experience that has been stimulated by the music program. In music-centered GIM, however, the intent of the guiding intervention is to establish the music as the focus of attention. Therefore, the music-centered GIM session heavily utilizes and expands the category of “re-focusing on the music” in order to develop a direct, immediate relationship with the music. (The term I developed for this style of guiding in GIM, which is to utilize frequent interventions that specifically focus on the music, is “guiding close to the music,” however, for purpose of this study this term is changed to “music-centered guiding interventions.”)

To summarize: The definition of music-centered GIM for this study is: an individual form of GIM in which the client listens to extemporaneously linked programs of classical music, some of which are repeated, in an altered state of consciousness. The client interacts with the GIM therapist who uses primarily music-centered verbal guiding interventions. The music-centered GIM session is structured as: prelude (preliminary conversation), induction, guided music-imaging, return, and postlude (mandala drawing and discussion).

music-centered GIM is a modification of BMGIM because it uses repeated listening and music-centered verbal guiding interventions. The intention of repeated listening is to allow time for the client to gain a deeper hearing of the complexities inherent in classical selections of music. The intention of the music-centered guiding is to keep the client's focus on the music experience to allow him to relate directly to the music. Both of these procedures work together to keep the GIM session music-centered. Therefore, although the goal of music-centered GIM is the same as BMGIM, its modified procedures create the conditions within a GIM session to direct clients towards the closest encounter possible with a piece of classical music.

### 2.3 Research questions

The first publication in chapter 1 concludes: "The music knows the answer; it is up to the client to bring in his difficulty and to allow the music to guide him to its origin, or perhaps its solution" (Summer, 1992, p. 53). In 1992 I conjectured that GIM guides the client by suspending linear time when the client merges with classical music in a receptive state. Subsequently after many additional years of theorizing and teaching about how classical music "works" in GIM from my clinical practice with adults, I was motivated to broaden my horizons beyond my own ideas. Interviewing well adult GIM clients would provide verbal descriptions; and a systematic, hermeneutic approach to data analysis would help me to interpret their descriptions and insights about the music experience in GIM. Therefore, this study was designed to gather qualitative data that came directly from the moment by moment client perspective to gain a new and broadened perspective on the music experience in music-centered GIM in order to answer the following questions:

1. How do participants *experience* the music portion of a music-centered GIM session?
2. How do participants *understand the music experience* in a music-centered GIM session?
3. How do *I understand* the music experience in music-centered GIM?

## Chapter 3: Literature Review

This literature review includes topics related to music-centered GIM. The development of music programs for GIM and current perspectives regarding music programming are covered in Section 3.1. Section 3.2 reviews research on the relationship between music and imagery and contrasts the viewpoints taken by these studies. Section 3.3 examines listening perspectives from three areas: listening in non-clinical situations, listening in music psychotherapy, and listening in GIM, exploring the different listening positions possible in GIM. The concept of repeated listening is addressed in two areas: repetition in non-clinical situations and repetitions in music psychotherapy; no literature was found on repeated listening in GIM. Section 3.4 outlines the literature in music-centered music therapy that describes the direct experience of music in GIM. Section 3.5 discusses guiding interventions within the GIM literature, exploring the already existing examples of music-centered guiding interventions; section 3.6 covers publications written by clients and research that investigated the client perspective. These studies are taken from two areas: music psychotherapy and GIM. Although six of my publications (Summer, 1992, 1994, 1995, 1998, 2002, 2006) are related to the topics covered in this literature review, they have not been incorporated into this chapter since they are included in their entirety in chapter one. The chapter concludes with a discussion of the need for the study.

### 3.1. Music programs in BMGIM

A review of the literature on the music experience in BMGIM reveals several areas related to this research study: 1) the development of music programs, 2) Bonny's explanations of her music programs, and 3) BMGIM therapists' analysis or examination of BMGIM programs.

Helen Bonny's central publication, *The Role of Taped Music Programs* (1978b/2002) describes Bonny's initial development of the core GIM programs that were subsequently revised with Keiser-Mardis for more practical use in GIM training (Bonny & Keiser- Mardis, 1994). In 1996, Bruscia contributed his revision of the GIM programs with a ten-CD set of music, *Music for the Imagination* (Bruscia, 1996), that contained programs with a mixture of selections from Bonny, Keiser-Mardis, and Bruscia. A recent relevant publication is a compendium of Bonny's programs (Grocke, 2002b) GIM programs from other GIM Fellows (Appendices B-L in Bruscia & Grocke, 2002, p. 555-591) and Bonde's (2007) comprehensive and accessible database of GIM programs.

Bonny originally designed music programs for LSD therapy sessions at the Maryland Psychiatric Research Center. Initially, she conceptualized the LSD client as needing three different types of music: 1) “music to bring on the high mystical states,” 2) “music to bring the middle ground of everyday experience to show the goodness of that existence, showing order, structure; the browns and plain colors of hum-drum life,” and 3) “music to reflect the lows – when the drug seems to take you down to the black, brown, stark white and gray” (Bonny, 1969, p.1). After additional study, Bonny summarized five functions of the music in LSD research, to: “1) help the patient relinquish usual controls and enter more fully into his inner world of experience, 2) facilitate the release of intense emotionality, 3) contribute towards a peak experience, 4) provide continuity in an experience of timelessness, and 5) direct and structure the experience” ((Bonny & Pahnke, 1972/2002, p. 22). Seven years later and after developing her own method of Guided Imagery and Music, Bonny adjusted the functions of music to more accurately reflect its functions in her non-drug method, GIM (Bonny, 1979/2002): “1) it provides a structure for exploring difficult conflict areas of the self, but it does not limit the flow or access to a wide variety of other experience which are important to the person, 2) it is a non-verbal means of establishing rapport with a client, 3) it provides an easy access through spontaneous regression to childhood events, 4) it is a mood changer, 5) it fosters positive, oceanic, religious-type experiences which may have life changing properties for the individual, and 6) it provides an encapsulation of time and space; the past, present, and future which may be experienced concurrently”(p. 97). The evolution of Bonny’s ideas about the role of music in GIM are consistent in her emphasis that a primary function of the music is to stimulate peak experiences, mentioned as high, mystical states in 1969, peak experience in 1972, and positive, oceanic-type religious experience in 1979. Another function closely related to stimulating peak experiences is the experience of timelessness, identified as “continuity in an experience of timelessness” in 1972, and “an encapsulation of time and space; the past, present and future which may be experienced concurrently” in 1979. In fact, in 1979 only two new functions specific to GIM were introduced: rapport with the client and spontaneous regression. The other functions are very similar to those she identified years earlier in the LSD research.

Bonny’s descriptions of her music programs rely on the use of an “affective contour.” Her most extended description of the affective contour of her programs is in *The Role of Taped Music Programs* (1978b/2002). She articulates her concept of affective contour and provides

examples of the affective contour of several music programs. Two interviews of Bonny – Grocke’s (2002a) and Cohen’s (2003-2004) – give further perspectives about the strategies she used for selection and linking pieces of music together for GIM programs. Bonny was concerned with helping trainees to learn her music programs before using them with clients. In 1993, she summarized a method of teaching music programs to GIM trainees called “Body Listening” (Bonny, 1993/2002). In her final publication about music, Bonny turned her attention to the function that music plays in leading listeners/players into spiritual experiences: “1) music explores/uncovers the depths – our personal depths – and allows us to perceive ourselves and situations in ways that we don’t normally see them, 2) music renews memories of past events, 3) listening to and playing music requires discipline and concentration of the kind needed to pursue the spiritual life, 4) music satisfies the senses... It satisfies emotional needs and opens the door to feelings of safety, 5) music suggests forgiveness, 6) music provides rewards for effort, 7) music suggests meditative states, 8) music provides a safe, structured avenue to experience difficult memories, and 9) music provides a venue for adoration and worship” (Bonny, 2001/2002, p. 179-180).

Several publications address the use of the GIM music programs. Abrams (2002a) comprehensively reviewed and compared GIM therapists’ approaches to the analysis of GIM music programs and found three distinct approaches: 1) the musical approach; focused primarily on the properties of the music itself and their metaphorical implications, 2) the phenomenological approach; based on how GIM clients have responded to the music experientially, generally in the form of imagery, and 3) the heuristic approach; based on the analyzer’s own experiences of the music programs under conditions similar, or identical to actual BMGIM sessions. A chief difference among analyzers was found in the purpose(s) of the analysis. While some approaches sought to analyze a music program’s influence on imagery (cause and effect relationship between music selections and reported imagery), others sought to discover the general potential of the music program.

One publication, Wigram, Pedersen & Bonde (2002) contributes to the literature on music programs by organizing pieces within the existing GIM repertoire into categories. They used a “psychodynamic, metaphoric interpretation of music, independent of style, genre and origin” to classify pieces into three categories: supportive and image stimulating music, explorative and uncovering music, and an intensive level of music reserved for specialized

clinical or experiential purposes (p. 105). Another publication, (Bruscia, 2002b) contributes to music programming by identifying three different strategies used by GIM therapists for programming music in GIM sessions. He proposed a three level, developmental framework for programming strategies. At the basic level of programming, the GIM therapist selects only pre-designed programs from the GIM program repertoire. At the intermediate level, pre-designed programs are used flexibly. The therapist extemporaneously mixes and matches sequences of music from pre-designed programs, resulting in new sequences of music. At the advanced level of programming, the therapist designs completely original programs of music prior to the session, or spontaneously links pieces during the music imagery experience.

### **3.2. Relationship between music and imagery**

Research that investigates the relationship between music and imagery can be divided into quantitative and qualitative with each category revealing a different focus. Quantitative studies have sought to identify a causal effect of music upon particular variables of the imagery experience. These studies attempt to increase our understanding of the specific effects of music on the imagery process and offer a rationale for using music as a stimulus for imagery in therapy.

For example, one research study, *The Effect of Music upon Involvement in Imagery* (Summer, 1983) tested the effect of music on the variable of involvement in imagery with two randomized groups. In the first trial, both groups received an imagery induction without music. In the second trial, only the control group received a second imagery induction with no music while the experimental group received the second imagery induction with music (Schoenberg *Die Gurrelieder* excerpt). A questionnaire developed by the researcher used three separate measures of involvement in imagery— two quantitative, one qualitative: 1) scoring the number of senses involved in the imagery, 2) scoring on a rating scale of involvement in imagery, and 3) a verbal description of the imagery experience which served as a subjective measure of accuracy for the study. Although the overall results did not support the study's hypothesis, the music group's self-rated involvement scores were significantly higher than the non-music group scores on the second trial.

McKinney (1990) tested the effect of music on type, vividness, and activity of imagery, as well as percentage of time imaging using two randomly assigned groups of music students. The experimental group received an imagery induction with music and the control group received the imagery induction with no music. The results showed that the use of music had no

effect upon any of the imagery variables. McKinney & Tims (1995) reanalyzed the data from McKinney (1990) and reported on a second experiment with music students that divided its subjects into high or low imager categories. Testing their responses to music imagining and silent imaging, they determined that “music has both broad effects on the [spontaneous] imagery of all persons regardless of imaging ability and also differential effects according to the person’s imaging ability” (p. 42). They found that vividness of imagery remained stable in response to different selections, but concluded that the nature of the broad effects of the music appeared to vary with the piece of music used.

Burns (2000) used two standard imagery tests, the Tellegen Absorption Scale and the Gordon Test for Imagery Control, to assess the effect of classical music on absorption of imagery (a measure of involvement) and control of imagery. She tested four independent groups, each under a different condition: control, music imaging, silent imaging, and music listening. The results of the imagery control tests showed no effect for any of the four groups, but absorption tests showed all three experimental groups scoring significantly higher than the control group. Therefore, Burns concluded that music and imagery both alone and paired increase levels of absorption.

Band, Quilter & Miller (2001-02) examined selected music and inductions on several variables of imagery: vividness, control, absorption, tension/anxiety, vigor/activity, and depression/dejection using two tests: Visual Analogue Scales and an Imagery Content Questionnaire. Her design included six treatment conditions that tested baroque music, impressionistic music, and silence with both structured and unstructured inductions. Whereas Burns found no significant difference in absorption scores between the music versus imagery treatment groups, Band et al found that music alone significantly increased the absorption measure and the vividness measure. The study also found that vigor/activity was significantly increased by baroque music, and “the presence of music significantly increased visual details, bright colors, sensations of movement, emotions, and experiences of past time (p. 25).” This large scale, multiple measure study concluded that music was effective in enhancing several aspects of imagery.

Lewis (1998-99) correlated BMGIM clients’ imagery experiences with the specific music programs that stimulated them, and she suggested a causal relationship between specific BMGIM programs and transpersonal experiences. In her research she studied the occurrence of

transpersonal experiences in 128 client sessions and found that transpersonal experiences occurred most often during five GIM programs: *Peak Experience*, *Mostly Bach*, *Quiet Music*, *Grieving*, and *Positive Affect*.

Several qualitative studies examining music and imagery contribute to a deeper understanding of GIM through phenomenological description. These studies connect verbal descriptions of the BMGIM music programs with verbal descriptions of clients' imagery experiences. For example, Kasayka (1991) described the *Peak Experience* music program through a phenomenological process and subsequently placed clients' imagery descriptions alongside the verbal music descriptions. Through this process she examined the relationship between the *Peak Experience* program and transpersonal experiences.

Grocke (1999a) interviewed seven BMGIM clients and their therapists about pivotal moments (turning points) in therapy. After analyzing the interviews and articulating the themes she found in both the client and the therapist experiences, she juxtaposed each client's pivotal moment with a phenomenological description of the specific piece(s) that had stimulated it. This study concluded that the life transforming moments of radical change that had occurred in seven research subjects during a GIM session were underpinned by "strong, structured music in a musical form which supports the client and provides a safe container for the experience" (p. 209).

Marr (2001) also studied the relation between music and imagery in her client sessions. She transcribed four clients' imagery sequences onto the musical score of pieces from the *Grieving* program. Subsequently she used verbal music descriptions to examine and compare the influence that specific musical elements had upon the clients' imagery through an "event structure analysis."

Grocke developed a tool to aid researchers in the parallel analysis of music and imagery. Her Structural Model of Music Analysis (1999) has been used in several qualitative GIM research studies (including Grocke, 1999a; Marr, 2001; Bonde, 2005, 2007a) to conduct a parallel analysis of music and client imagery. The SMAA was designed to examine the structural properties of music in order to describe and compare selections of music for therapy. It uses relevant musical parameters which are arrived at through an extensive categorizing and clustering of various musical elements and which allow for this kind of comparison.



Although a causal or correlative approach to the study of music and imagery is informative, several recent studies have challenged the concept of a direct correlation between music and the images it produces. Bruscia et al (2004) state, “The assumption that music evokes imagery casts the relationship between music and imagery as linear, unidirectional, and objective,” which means essentially that the music is acting upon the listener in “a decidedly positivistic perspective” (p. 29). The collaborative heuristic study by Bruscia et al. describes their analysis of the *Imagery-M* music program. The method of analysis in this study was an outgrowth of a GIM training; therefore the analysis used six GIM trainees as co-researchers. All six researchers listened to the *Imagery-M* program under four different listening conditions: alert state/music-focused; altered state/music-focused; altered state/imaging free (BMGIM); and alert state/analyzing imagery. The conclusion of the study recommends qualitative, rather than causal, studies that investigate the music experience in GIM:

“It has been assumed that the best way to understand the causal relationship between music and imagery is to analyze the structure and content of the music – as objectively as possible – and then relate these objective properties to the structure and content of the imagery. In this notion, music is an object, and if enough can be discovered about the object, predictions can be made of the imagery that it will evoke – a decidedly positivistic perspective. The findings of this study suggest that music is not only an object, it is also an agent or party in a multi-faceted, inter-subjective interaction. . . It is probably better if guides remain open to the potentials and possibilities of a music program, rather than adhere to any firm predictions of its effects on either the imager or the imagery” (p. 29). To summarize this finding: “types and content of images generated during a piece of music are not always directly related to the structure or properties of the music” (p. 26)

Although this heuristic analysis sought to examine the image potentials of the *Imagery-M* program, the study found no relationship between the structure of each piece of music and the structure and/or content of imagery it produced in six GIM therapists under four listening conditions. Contrarily, they discovered the need to “argue against any approach to analyzing the imagery potentials of BMGIM programs without taking into account the person’s ongoing imagery experience, their imaginal style, and their personal process” (p. 27).

Although thorough, this research study did not address the relationship of music and imagery when it is used clinically as did Bonde (2005, 2007a, 2007b) in his research with six female cancer survivors in BMGIM sessions. In a comprehensive analysis he used a combination of phenomenological, hermeneutic, and heuristic procedures to analyze fifty-seven client sessions. His analysis identified three categories of GIM music: supportive, challenging, and mixed. He then conducted four further analyses with several selections of music (the two that had been used most often in the GIM sessions, and several other simpler musical selections) as follows: 1) a phenomenological description of the music, 2) an analysis of the musical form, 3) a mood analysis using Hevner's "Mood Wheel," and 4) an analysis of the image potential of the piece. These layers of analysis were integrated into an *Intensity Profile* of each music selection. Then he juxtaposed segmented musical episodes and his hermeneutic interpretation of music/imagery potential with the six participants' imagery sequences, as well as the modalities of the imagery (i.e. visual, auditory, etc). Several of his findings are important to note:

1. In regard analysis of music programs, he advocates a combination of phenomenological, hermeneutic, and heuristic procedures, explaining, "It is not possible to infer the image (or therapeutic) potential of a piece of music from a phenomenological description or a structural analysis of the music" (2007b, p. 66).
2. He found that the participants' imagery was influenced by the music, especially the introduction of higher intensity and tension in a selection which was always reflected clearly and immediately in the imagery sequence.
3. Addressing the variability of the participants' responses to the same piece of music, he asserts that "the image potential of a music selection will become manifest as related to the individual focus and 'travel style' of the client" (2005, p. 302).
4. He developed a theory to describe the interaction of music and imagery: "If the basic mood of the music is matching the client's needs and energy level, as suggested in the 'iso principle,' the imagery will develop with the music. Any change in the levels of intensity and tension, as indicated in the Intensity Profile of the movement, is reflected in the imagery. Images are evoked, sustained and configured independently of musical form and style. However, musical form and style does influence the development of the imagery" (2005, p. 308).

To summarize, Bonde cautions against a causal relationship between music and client imagery sequences, concluding that the relationship of the image sequence to the music selection can only be found on a general, morphological level of the music. “There is no direct path leading from music to imagery. . .” (2007b, p. 66).

Aksnes and Ruud (2008) investigated the relationship between music and imagery. They first designed their own GIM program, *Soundscapes*, which used Norwegian composer Geirr Tveitt's music and one piece of Johan Svendsen. Using eight well adult participants' GIM sessions as data, they searched for connections between the music selections, metaphors in the imagery content, and the presence of body based schemata in the metaphors. Their analysis of the music and imagery was eclectic and multilayered; it shifted back and forth between music-structural analyses and imagery-related considerations utilizing detailed transcripts. Using an overall framework of cognitive metaphor theory, they narrowed their analysis to one musical selection and found it possible to trace the body-based metaphors that were raised by the selection back to specific, salient features in the music.

Two theoretical studies that explain the relationship between music and imagery were published by Goldberg (1995, 2002). She theorized a sequence of events relating music and imagery to emotion: a) music evokes the listener's emotions which, in turn, produce b) a series of images while the music sustains the experience; c) the images and emotion interact until the emotion has diminished at which time d) the affective influence of the music returns and evokes a new series of images. Goldberg's theory brings a new dimension to the examination of the relationship between music and imagery, as she links music and imagery together through emotion theory.

### **3.3. Listening perspectives**

Publications that examine music listening perspectives are not as common as would be expected in the GIM literature. Therefore, a broader investigation is necessary to glean relevant information for this study. Tüpker (2007) described and organized the many varieties of nonclinical music listening. Additionally, she compares the listening attitude sought after in most receptive music therapy methods to nonclinical (every day) music listening where the focus on the music “shifts gently between being-in-the-music and inner images, body awareness, thoughts and memories. At times we listen attentively, then we are concerned with something other than the music. Sometimes it more resembles a fast oscillation which creates the feeling

that music, and the other point of focus, work to keep each other in balance.” (2007, p. 30). In addition, she highlights the fact that all music activities actually include a facet of listening (e.g. a composer is listening while composing) and that we are able to listen to music even when it is not present (e.g. we remember a catchy tune or we hear music coming from inside ourselves as a memory).

Frohne-Hagemann (2007) introduces her publication, *Receptive Music Therapy* with a seminal chapter that addresses listening. She states that receptive music therapy demands a *culture of listening* that " includes qualities such as listening, becoming responsive, giving oneself up to personal experience with the help of music, healing, and learning to find oneself. Listening is the process of becoming active, consciously perceiving and consciously experiencing. When so viewed, Receptive Music Therapy is an active therapy” (p. 16).

Although Bonny does not often directly address the mode of listening used by the client or therapist in BMGIM, the receptive attitude in music is pervasive in her writing. The following comment exemplifies her teaching about the mode of listening in GIM: “GIM utilizes a mode of ‘being with the music,’ of participating more fully in the medium than does either the usual listening stance, or even, that of making music. It is literally allowing oneself to step into, or to become one with the music” (Bonny, 1989/2002, p. 133). Her comment, that GIM “creates that deeper, more focused kind of listening” (2001/2002, p. 183) is indicative of the listening mode of the GIM client. Goldberg (1995, 2002) contributed to the listening perspective in BMGIM using Gestalt theory to explain that the music “is always present, but may recede in conscious importance or seem to disappear momentarily as the gestalt (affect and/or image) comes into the centre of attention” (Goldberg, 1995, p. 119). The music is seen as a field that is always sustaining the internal experience – it is a catalyst and container – but it often recedes from conscious awareness.

The music listening experience is central in BMGIM therapy, yet there are few publications that closely examine the act of listening. Because this research study protocol utilizes a direct and focused listening approach in which the music, not the client’s imagery, is primary, three studies that include terminology for a music-centered listening approach are important to mention. Each author contrasts two possible listening positions of the BMGIM client: one in which attention to the imagery experience predominates, the other in which attention to the music experience predominates. Bruscia called these positions image-dependent

versus music-dependent (1991), music *in* therapy versus music *as* therapy (1998a), or music *in* transformation versus music *as* transformation (2002a). Garred (2006) used Buber's interpersonal positions: I-It and I-Thou. Wigram, Pedersen & Bonde's (2002) terminology is imagery-centered versus music-centered. These positions will be addressed further in the next section.

One additional study contributes terminology for different listening perspectives. Pedersen (1997) defined two contrasting listening positions to describe how a therapist "listens" to a client. Although her listening perspectives are broad based because they include listening beyond music experience, they are also relevant for music listening. Pedersen, who is also a GIM therapist, developed her perspectives from her music therapy practice with clients who have severe psychiatric disorders. She defined a receptive way of observing her clients that is "listening extra sensitively" with an intention to resonate as authentically as possible with the patient, and to accept any and all experiences that arise in the session (p. 100). She delineates two contrasting ways of listening: "Fog (1995, inspired by Schachtel) also talks about the autocentric and allocentric way of listening". . . "the allocentric perception is one of profound interest in the object, a complete openness and receptivity towards it, a fully turning towards the object which makes possible the direct encounter with it" and the autocentric way is "where one listens directed to one's self" in an embodied way (p. 103).

The concept of repeated listening (or repeated hearings) used in this study is not addressed in the GIM literature since it is not common practice. Nor is it addressed directly in the music therapy literature, although it is a common clinical practice to repeat the playing or listening of a piece of music within music therapy sessions. Although there is no published research on the clinical use of repeated music listening as a technique or strategy, Tüpker (2007) addresses nonclinical repeated listening. She explains that when we deliberately choose to listen to a piece over and over again that we "search to retrieve and restore something in us, and to bring it back into our experience. . . This is why any repeated listening is at the same time new listening. It is rewriting of former experience" (p. 23)

Several music therapists have reported on the clinical technique in which clients listen back to their own recorded, improvised music. For example, Nolan reported that after a group improvisation with girls with eating disorders, a "tape playback" technique (in which the group listened to their own improvisation before verbally processing it) brought his clients an

awareness of inaccurate assumptions and perceptions about themselves (1989). Trondalen found that her method of “self-listening” (2003) addressed the disconnection between soma and psyche in her clients diagnosed with anorexia.

### **3.4. Direct experience of music in GIM**

Aigen (2005) defines Guided Imagery and Music as a music-centered method. He says, “The two music therapy approaches that place the greatest emphasis on understanding the specific properties of music are Guided Imagery and Music and Nordoff-Robbins Music Therapy” (p. 115). Thus, as different as they are, these two music-centered models share concern with specific characteristics of the music comprising the basic interventions of the model (p. 116).

Aigen’s (2005) music-centered elements provide a context for the two music-centered adaptations to BMGIM; repeated music paired with music-centered verbal guiding techniques. The intention of these adaptations is to consistently turn the client’s attention towards the music in order to stimulate the deepest and most direct music listening experience possible. This aligns with one of Aigen’s defining elements of music-centered practice, wherein “the primary focus is enhancing the client’s involvement in music” (p. 94). He explains that in a music-centered approach the therapist’s primary focus is to formulate strategies to deepen and differentiate the client’s musical experiences in order to enhance their involvement in the music. “The musical process is the clinical process – in the sense that, at times, a purely musical description of a clinical interaction can be a self-justifying clinical event – the therapist’s primary focus is to formulate strategies to deepen and differentiate the client’s musical experiences. The therapy lies in the variety, complexity, depth, beauty, novelty, spontaneity, and honesty of musical expression” (p. 94).

However, Aigen did not directly apply his elements, which are described in relation to active music therapy methods and not receptive method, to BMGIM clinical practice. Therefore, hopefully this study, with its clinical treatment conducted within the context of music-centered practice, will add further understanding to the music-centered listening attitude. For example, this study asks the following questions related to music-centered music therapy theory: “Do music-centered GIM clients experience deep and differentiated music experiences? How does a music therapist enhance the client’s involvement in a music experience when the experience is receptive, rather than actively creating music? Does the strategy of repeating a piece of classical

music create for the client an opportunity to experience the depth and aesthetic beauty of a piece of music?"

A few authors in the GIM literature have articulated music-centered thinking as applied specifically to GIM. For example, Bruscia, in his case study of "Matt," described Matt's images as "music-dependent" because his images were "very susceptible to the various elements of music and to changes therein." This is in contrast with other imagers who are more "music-independent," and forge ahead with the imagery process they are undergoing, regardless of shifts or even drastic changes in the music (Bruscia, 1991, p. 597-598). Whereas Bruscia used the term dependent/independent to identify the client's position in relation to the music and imagery experience, he also used the terms "music *as* therapy" versus "music *in* therapy;" and later, he utilized the terminology: "music *as* transformation" and "music *in* transformation" to describe these positions in BMGIM from the therapist perspective. He defined music *as* transformation as a "complete and focused experiencing of the music . . . when the imager opens up to the music and enters the transformational processes unfolding in the music itself (Bunt, 2000). . . generating experiences that arise directly out of the music. . . The entire phenomenon is intrinsically musical in nature. . . In fact, often the nonmusical images and the verbal reports of them seem like mere artifacts of an essentially musical experience" (Bruscia, 2002a, p. 44). He contrasts this to music *in* therapy, the "opposite pole of the continuum" in which "the focus is not on experiencing the music as an intrinsically transformational experience in itself. Instead, the focus is on generating nonmusical images and experiences with the help of the music. Practitioners here regard GIM as the use of music-evoked imagery, rather than the use of music per se, and consequently tend to guide, explore, and discuss the meaning of the imagery rather than the transformations experienced in the music" (Bruscia, 2002a, p. 45).

Garred (2006) further developed Bruscia's "music *as* therapy" position within his dialogical framework for GIM: "Music *as* therapy within the BMGIM format could be seen as a form of therapy in which *music as such* receives the focal attention in the listening phase, which means that the qualities of the music itself come to the foreground. . . And this is not about 'content,' brought out through translation into some other medium, that is to say, verbalized as imagery, but more [about] the *process*, the intensity of the experience. . . It could be likened, again using early interaction for a *musical* analogy, with the mother and child going into a new orbit of interactive relation; the traveler has gone into a new experience of music, has been at a place not

traversed before" (Garred, 2006, p. 296). In his explanation of the dialogical approach in music therapy, Garred emphasizes the experience of relating directly to the music:

"But then, suddenly, as you are listening, as a dialogical perspective implies, the 'power of exclusiveness' as Buber (1970) calls it, may hold you, and you may enter into a direct, immediate encounter with just this music. You relate to it directly, as a unique event there and then, other concerns about it left aside. The music opens up as a living presence for you. And you hear it differently. Your relation to it has changed. And you get to know something about it in a way you did not know before" (p. 300).

He expresses the experience of relating directly to music in many different ways, including: a direct kind of knowing (p. 107), implicit relational knowing (p. 133), relating to the music in its immediate presence (p. 70), music-focused reception, a new orbit of interactive relation with the music (p. 296), increased relational capacity with the music (p. 304), and "I-Thou (You)" (p. 300). Overall, Garred likens these musical moments to "special moments of authentic person-to-person connection" that "bring forth a sudden shift in implicit relational knowing" and "rearrange intrapsychic landscape" in therapy (referring to Daniel Stern's theories). He offers theoretical and clinical evidence to support his basic contention that the music therapy client's relating directly to music is essential for reconstructive therapy to occur (p. 110-111).

Garred characterizes the music *as* therapy experience as occurring with two preconditions: 1) a gradual build up of therapeutic work from prior sessions and 2) a "sudden breakthrough" in which "the focus suddenly and powerfully turns to the music itself" (p. 302, 309). "The moment of meeting cannot be calculated or predicted. It requires a turning of the I towards a You, and at the same time, the I has to be met by the You to which the I turns. . . The moment of meeting comes out of *grace*" (p. 48). This aspect of Garred's definition leads directly to the clinical protocol of this research. Through its use of repeated music and music-centered guiding interventions, the music-centered GIM session creates the opportunity for the study participants to relate to the music program from the music *as* therapy position. In fact, the aim of this strategy is to create the opportunity for direct relation to the music so that the "moments of meeting" the music occur more dependably and frequently, and not accept the haphazard nature of their occurrence as in BMGIM.



Wigram, Pedersen & Bonde (2002) also contrast two positions (they use the terms adopted for this study: “imagery-centered” and “music-centered” and apply them to the BMGIM session. They report, “From Position A [the imagery-centered position], the therapist understands the music as a stimulus evoking imagery. The music is a ‘projection screen’ on which the unconscious of the client may project its content. . . From Position B [the music-centered position] the therapist considers the music as the core element of the experience. The imagery is a tool enabling a maximum outcome of the music experience” (p 118-119).

### **3.5. Guiding interventions**

There is a paucity of literature about guiding techniques in GIM despite the fact that in BMGIM the music imagery experience of the client is highly dependent on the verbal guiding interventions of the therapist. The main treatise on guiding is Bonny’s original monograph, *Facilitating GIM Sessions* (1978a/2002). Bonny suggests the following guiding interventions be utilized: maintaining contact, encouraging action and reaction, encountering resistance (working with it without suggesting a solution), evoking feeling responses, echoing the feeling state of the client, watching and encouraging body responses, interpreting bodily imagery, working with fearful or fascinating experiences, and touching and holding the client, reinforcing and reflecting, staying present (without distraction) evaluating all elements of the session, intuiting the client’s experience (1978a/2002, p. 286-292). In her summary of BMGIM, Ventre (2002) referred to four of Bonny’s guiding strategies as essential: interventions that facilitate the client to 1) act or react to the images, 2) encounter and work through images of resistances, 3) have emotional or feeling responses, and 4) have body responses (p. 34).

Although neither Bonny nor Ventre include interventions that focus the client’s attention on the music, it would not be correct to assume that their guiding strategy was not music centered. However, these publications do not address the topic of music-centered guiding. Therefore it is necessary to turn to unpublished educational documents. Keiser-Mardis (1978) developed an educational handout for GIM therapists to use with clients who were musicians. *Guiding a Trained Musician in a GIM Session* contains a specific list of music-centered interventions for the musician client who found it difficult to “release the deeply analytical skills in which he has been schooled” (p. 1). After suggesting that the client initially approach the music in his usual way (using his training), Keiser recommends that the client use a variety of different approaches to the music (i.e., “visualize the melody,” “give colors to the instruments or

voice(s),” and “visualize the singer’s vocal cords. Be deeply aware of the vibrations. Liken them to the vibrations of a string instrument” (p. 2-3).

Summer developed basic and advanced guiding educational materials at the Bonny Foundation GIM Training (Summer, 1989a, 1989b). Basic verbal guiding intervention categories were linked to the stages of the unfolding imagery experience: 1) Reflecting: being fully present with the client, 2) Investigating: asking for description of the imagery experience, 3) Allowing: validating or giving permission, 4) Involving: working through the imagery experience, and 5) Re-focusing upon the music (1989a). At the advanced level, verbal guiding categories were linked to the unfolding stages of the therapeutic process: 1) symbiosis (matching senses), 2) going in/bridging (giving permission), 3) working through expression (active involvement in a specific emotional or physical process), and 4) engagement in transpersonal process (receptive involvement) (Summer, 1989b, p. 1-3).

Bruscia’s four guiding categories from his GIM training materials (2003): “Basic Guiding Interventions” relate to stages of the unfolding imagery experience: 1) Reporting the imagery experience: to report and ensure an active dialogue between client and therapist, 2) Forming the imagery experience: once focused on an image/experience, these interventions help the client to follow it, to develop it in the sensory modality in which it is experienced, 3) Amplifying the imagery experience: once an image/experience is formed, these interventions expand or further develop the client’s experience of it, 4) Engaging the client in the imagery experience: these interventions stimulate active participation in the image/experience to the deepest or fullest level possible (Bruscia, 2003, p. 1).

Whereas Bonny (1978a/2002) and Ventre (2002) do not include music interventions at all in their categories, Summer (1989a) includes a separate category for music interventions, and Bruscia (2003) includes music interventions within all of his categories except for the initial category (reporting the image).

Although published clinical case studies do not address guiding directly, there are several cases in the literature that provide session transcript excerpts that integrate some guiding interventions with case material (Blake, 1994; Short, 1996-97; Moffitt & Hall, 2003-04; Newell, 1999).

### 3.6. Client experiences in GIM

There are few research and clinical reports of client experiences in music therapy. Stige (1999) addressed this need: “we need to understand – as well as possible – what the client understands” and expressed the demands of this task: “Music – like dreams – is extremely polysemic, it includes so many possible layers of meaning. Therefore, discussions of meaning become very complex.” Further, he proposed an investigative strategy: “We need to develop our skills of guessing meaning and assessing guesses in specific contexts and processes of therapy.” He advocated soliciting thick descriptions of experiences from clients in order to gather the client’s meanings, “but we also need to interpret this in a broader perspective, including our own theoretical presumptions” (p. 61, 63). Stige illuminated the importance of understanding the meaning of the client’s music experience from the client’s perspective with his case study of Harold. “Harold’s case illustrates, in a very basic way, how the same music might be connected to very different experiences from time to time, while changes in the music do not necessarily create changes in the experience, at least not in the way it is reported verbally. This illuminates the non-fixed relationship between sign (here: music) and meaning, and thus the importance of asking the client for his experience. For instance the music of sessions 12 and 13 was not very different. . . . However, as experienced by the client, there were miles of difference between them” (p. 77). His case study concluded with an appeal to music therapists to more fully investigate the client perspective of music experiences.

*Inside Music Therapy: Client Experiences* by Julie Hibben (1999) is the main publication in music therapy that represents the client’s perspective. It contains nine reports by GIM clients (some are co-authored or authored by the therapist, but use the client’s words). Of these nine chapters, five articulate the client’s perspective on the music experience (four single case studies, one qualitative report on seven GIM participants). Three of these case studies contain brief descriptions of the music experience; one has music as its exclusive focus. Certainly these chapters do not represent an in-depth examination of the client perspective; nonetheless, they provide first person narratives that give an understanding of how these clients experienced the music, as well as an insight into how they understood their BMGIM music experiences.

Schulberg (1999), a BMGIM therapist as client expressed how the music functioned for her within the therapeutic process. “The music provided the dynamics that evoked the experiences, a structure that provided the safety to have the experience, a container expansive enough to hold all the experience, and the integration of all of these that supported healing and

transformation” (p. 11). Newell (1999), a music therapist as client, expressed, “The music was very powerful in supporting and magnifying my emotions, helping me to acknowledge them, express them, and then find solutions for how to deal with them. . . I was amazed that the same piece of music could be used during many different sessions without my awareness. Not only would I not recognize it as being the same music as the week before, but it would bring up different images each week depending on where I was emotionally on that particular day. This was empowering and gave me the awareness that I have ‘the answers’ within myself” (p. 26). Allison Short (1999) summarized her GIM client, William’s comments about the music: “I think that the music for me has another sort of motherly connection. . . I don’t know where the music goes to, but it certainly gets inside of me! It kicks around things” (p. 159).

One BMGIM case study in the Hibben collection focuses exclusively upon the client’s perspective of the music. Isenberg-Grzeda (1999) also expressed the complexity of the music experience from her position, a BMGIM therapist as an ongoing client in BMGIM sessions. She framed her narrative with the question: “How does the music act on me as I listen to it in a state of preparedness?” and responded with recalled descriptions from many sessions from her therapeutic process. She concluded, “I have often found that the same music acts differently on me at different times. Music that can soothe me during one session can stir up rageful feelings during another session. . . I feel that this lack of predictability speaks to the complexity and the richness of the relationship between music and the human psyche” (p. 65).

Grocke’s (1999b) brief narratives of seven clients who described a pivotal moment that had occurred for them in GIM therapy are also published in Hibben’s collection. Her interview of each client inquired into their experience of the music at the identified pivotal moment. Grocke reported their impressions, including: music “sustained the pivotal moment so that it could be felt fully, music moved her along, music helped to build up strength to hold her in one place so that she ‘lived the moment’” (p. 303), among other descriptions.

Pellitteri, a GIM therapist as client, contributed his client perspective from his reflections upon his personal GIM therapy (1998). He focused his self-study on the analysis of his own transference during a single GIM session in which the transference dynamic manifested, and transformed. Using this session, he illustrated the interactive roles of therapist, music, and imagery. He concluded that the “role of the music was to create a holding environment in which I could feel safe and secure” (p. 485),

When Abbott (2004) informally studied the myriad responses of her GIM clients to the music in BMGIM sessions, she determined that their perspective deserved systematic examination. She developed a qualitative study to research client experiences with the music in BMGIM. All fifteen well-adult study participants had some level of GIM training and had experience as clients in GIM therapy. Through a qualitative interview process, she collected their perspectives on two memorable GIM sessions: one positive music experience; one negative (uncomfortable or challenging) music experience. Her research intent was to collect narratives of the participants' positive and negative music experiences and to discover the essential similarities and differences between them. Abbott's investigation broadened beyond this initial scope because the participants were drawn to discussing the significant impact their two music experiences had upon their therapeutic processes and/or lives. Therefore, she expanded her study to collect data from all components of the GIM session, not only the music experience. After coding the data she delineated four phases in the unfolding of the music experience: 1) reaction phase, where the client begins his awareness and reactions to elements in the music experience (she includes self, therapist, music, and image) and he casts the music into either a positive or negative role; 2) engagement phase, where the client further explores, struggles with, and/or managed their experiences; 3) closing phase, in which the end comes either because the music ends or the material ends or shifts; and 4) reflective-evaluative phase, in which clients described how the music experience impacted their therapy and their life (p. 52). She divided the participants' coded vignettes into these phases and searched for patterns, sequences, and frequencies of codes across participants and across negative and positive vignettes. One discovery was that the participants had worked with negative music experiences in ways that were different than positive music experiences. They needed additional assistance from the therapist to work with negative music experiences. Abbott's research contributes to the first fully described, systematically analyzed client perspective on the music experience in BMGIM.

### 3.7. **Summary: Need for the study**

Although there are many publications in which music is identified as a primary factor within the BMGIM process and is referred to as the "co-therapist" (Goldberg, 1992; Stokes, 1992; Skaggs, 1992; Clark, 1998; Hahna & Borling, 2003; Isenberg-Grzeda, 1998; Bonde, 2007), this is the first to research music in GIM as the primary therapist (Summer, 1998). Therefore, the general purpose of this research within the area of the Bonny Method of GIM is to bring

attention to the concept of music as the primary therapist. Its specific purpose is to study music-centered GIM as a modification of GIM that emphasizes music's primacy.

Within general music therapy practice, the purpose of this research is to better understand and articulate the notion of what music-centered GIM practice is. It has been mentioned by Aigen (2005) and further addressed by Garred (2006) but it has not yet been systematically investigated through research. Within GIM practice, the purpose of this research is to more clearly understand applications of music-centered GIM as an adaptation of the Bonny Method of GIM. I hope this research will encourage other GIM practitioners, trainers, and trainees to reflect upon what the notion of being a music-centered GIM practitioner means. I also hope this study will encourage new dimensions of music-centered practice in GIM.

## Chapter 4: Method

This chapter includes nine sections that outline each part of the method: the hermeneutic nature of the method itself (section 4.1), the design (section 4.2), self inquiry (section 4.3), pilot study (section 4.4), participants (section 4.5), procedure and materials (section 4.6), GIM session protocol (section 4.7), interview protocol (section 4.8), and data analysis protocol (section 4.9).

### 4.1. Hermeneutic Inquiry

Hermeneutic inquiry is an approach to qualitative research utilized in “situations in which we encounter meanings that are not immediately understandable but require interpretive effort” (Gadamer, 1977, p. xii). This study’s investigation of the receptive experience of classical music is just such a situation. Four aspects of this study were based in hermeneutics: the self-inquiry, data collection, data analysis, and the narrative nature of the actual data.

The first aspect was a hermeneutic self-inquiry. Kenny, Jahn-Langenberg & Loewy (2005) comment that hermeneutic research “always includes a self-reflective component, called a self-hermeneutic.” They justify its importance when they make it clear that the “researcher is the primary instrument of the work (p. 335, 341). Gadamer maintains that “We cannot approach the text from outside . . . we cannot avoid our self in attempting to know the text as meant by the author (Polkinghorne, 1983, p. 233). Therefore, it is essential to conduct a self-study to bring conscious and unconscious biases related to the topic of the “text” to awareness. Section 4.3 reports on the reflexive and RepGrid self-inquiry that I conducted to elicit my already established assumptions about music-centered GIM.

The second hermeneutic aspect of this study was the data collection. Bonde explains that meaning is uncovered through description, analysis and interpretation (Bonde, 2004). To this end, data is collected in layers and meaning emerges through the dynamic interaction between layers of texts. For example, in a hermeneutic study on assessment, Loewy (2005) gathered layers of data from five music therapist panelists. First, each panelist observed Loewy’s videotaped assessment of an emotionally disturbed child and submitted a written assessment report. After analyzing these texts, she solicited additional data from each panelist through an interview. The interview included member checking strategies so Loewy could check her first layer of interpretation. It also included an additional open-ended inquiry about assessment. The second layer of text, the interview transcript, was then compared with the first layer of text. The examination and re-examination of layers of text yielded gradually deepening meanings of the

panelists' various assessments of the client. This kind of layered data is a search for meaning, but not an attempt to find a "correct" meaning of the original text. In Gadamer's view, there is no singular meaning intended by the author of the text. He finds texts to have an "excess of meaning" that includes the text as well as the varying interpretations through which the text is transmitted (p. xxv). Hermeneutic interpretation is especially sensitive to the circular nature of understanding the human realm (Polkinghorne, 1983, p. 240). In order to provide successive, circular levels of understanding, textual data was collected in layers from: 1) the GIM session, 2) the linear re-hearing of the GIM session in the interview, and 3) an open-ended dialogue between myself and the participant in which we "co-constructed" meaning in regard the re-hearing of the GIM session. Section 4.8 shows the systematic collection of data for this study.

The third hermeneutic aspect of the study was the data analysis which utilized a hermeneutic spiral (see section 4.9). The intention of hermeneutic inquiry is to provide successively deepening understanding through the circular comparisons of data. Therefore, this inquiry is not only circular, it is actually a never ending spiral. "There is no final arbitration, and an accepted interpretation is always open to further argument" (Polkinghorne, 1983, p.235). For the present study, the goal of the hermeneutic analysis was conducted to repetitively re-examine participants' music experiences during the GIM session in order to produce successively increasing levels of understanding.

The narrative aspect of hermeneutic process was also employed in this study. Kenny et al (2005) contend that narrative inquiry is closely related to hermeneutics because it is concerned with the analysis and interpretation of texts (2005). Polkinghorne (1988) explains that certain kinds of knowledge and truth can be understood only sequentially, in a temporal narrative unfolding. . . Plotting is an activity in which temporal happenings are shaped into meaningful units. . . When we hear a plot, when we hear the meaning of a story, we call this kind of understanding, hermeneutic understanding (p. 160). Bonde finds parallels in hermeneutics and BMGIM because the imagery from a GIM session can so easily considered a plot, or narrative. In this regard, Bonde has studied GIM sessions using Ricoeur's narrative theory (Bonde, 2004). The hermeneutic concept of emplotment is relevant to this study since the data and the layers of interpretations of each participant's music experience were derived from the unfolding "plot" as it occurred in the GIM session. Ricoeur (in Polkinghorne, 1983) explains that it is possible to configure and re-configure texts into an infinite number of interpretations because we can never



be fully consciousness of our motivations nor our actions. Although this study concludes with a final analysis of the data, there may still be future re-interpretations of the data.

## 4.2. Design

The method of this study endeavored to broaden my understanding of the music experience in music-centered GIM by collecting data from six study participants that was rich, filled with reflection, and could undergo the process of a hermeneutic analysis. The study asked two research questions that address the client perspective: *How do participants experience the music portion of a music-centered GIM session?* and *How do participants understand the music experience in a MCGIM session?* A third research question addressed my perspective: *How do I understand the music experience in MCGIM?*

The following procedures, which will be fully described in this chapter, were designed to address the three research questions. A preliminary period of self-inquiry was conducted (see section 4.3). As a GIM clinician and GIM trainer I have spent many years developing a solidified theoretical and clinical perspective on music-centered GIM practice. A hermeneutic self-inquiry served to help me to identify my conscious and unconscious assumptions to the fullest extent possible. A pilot study using one participant was carried out in order to clarify procedures for the GIM session, for the interview, and the data analysis (see section 4.4). Participants were selected (see section 4.5) and procedures and materials were identified (see section 4.6). Protocols for the music-centered GIM session (see section 4.7) and the qualitative interview (see section 4.8) are described. Finally, the hermeneutic approach to data analysis is explained and the steps of the analysis are identified (see section 4.9).

## 4.3. Self-inquiry

In order to better understand how my biases might impact the elements of this research, I examined both my conscious biases and my unconscious assumptions about clients' experiences of music-centered GIM. This is especially important when examining the findings of this study.

### 4.3.1. Reflexive self-inquiry

Through a process of personal reflection previous to and during this study, I discovered the following conscious biases:

1. Acting as clinician/interviewer for the study. One important element that I had to consider was the possible bias inherent in acting as both clinician and interviewer for this study. If I were seeking the most objective viewpoint possible from the qualitative interview, I would

have assigned either the clinician or interviewer role to another GIM Fellow. However, because I was seeking to comprehend music-centered GIM in all its complexity, it is more advantageous that the qualitative interview developed as naturally as possible from the GIM session. A division of the responsibilities of clinician and interviewer between two people would have resulted in a loss of vital subjective information because the interviewer would have approached the interview without having lived through the music experience with the participant.

2. Accumulated clinical bias. I have been using GIM and other music & imagery techniques as a clinician and for my own personal growth for 28 years. The fact that I have experienced GIM from both roles is an advantage for me, although it still should be considered a bias that my main understanding is from the therapist role.
3. Accumulated theoretical bias. As a clinician, my opinions about the role of music in GIM are well thought out. The role of music in GIM has been the main topic in most of my publications. All of the publications lean towards three theoretical orientations: psychodynamic, transpersonal, and music-centered.
4. Accumulated bias as a GIM trainer. I have been teaching about the role of music in GIM as a primary GIM trainer for 19 years. As a trainer, I share my theories and attitudes about music with my students. I have created several courses specifically about music, and I have created new ways of describing and studying the music used in GIM.
5. Accumulated bias as a GIM client. My three primary modes of response to music when I work alone are music-based metaphors, emotional and kinesthetic imagery. In GIM sessions with a therapist, I am primarily an emotional and kinesthetic imager. And so, I have a bias towards believing that these are the strongest, or the most powerful therapeutic experiences. I am aware that I emphasize these modes of experience when guiding my clients.
6. Accumulated bias from my personal relationship with classical music. My musical taste is a significant limitation in regard the pool of music from which I choose GIM programs because I only use music with which I have a personal relationship. In addition, within the pool of classical music that I use for GIM program, my familiarity with those pieces can limit my choices because I have a tendency to utilize pieces with which I am most familiar.
  - I identify a tendency in my daily life is to listen to classical music (usually heavy Germanic, romantic, symphonic or chamber works). I also identify a recent shift in my

classical music listening towards lighter compositions (Dvorak rather than Brahms, for example).

- In classical music, I have a definite tendency towards works where French horns predominate because this is my instrument. I have played orchestral and chamber works on horn, and the pieces that I have either performed or read are more vibrant to me than other classical music.
- One of my strongest GIM experiences was a session in which I felt my existence stop at the end of the music. This brought my awareness to a feeling of total dependence upon the music to enliven me. This experience is indicative of the nature of my personal relationship with music.

#### 7. Accumulated bias in regard repeated music

Although the decision to repeat a piece of music within a GIM session is based on the client's need, I can also recognize another component to this decision making process which involves a feeling of trusting a particular piece of music to "hold" the client in his process. I believe this is related to my personal relationship with the composition.

In summary, I have strong opinions about music in GIM that have arisen from my clinical GIM practice, personal GIM sessions, publications, and presentations. For more than twenty-five years in all of these roles, I have reflected on my attitude, values, and theories about the music experience in GIM to some degree. Although I am coming to this study with strong opinions, I am eager because I have never examined the music experience in such depth before. Through my self-inquiry I have re-invigorated a questioning attitude about music that will lead me into a new dimension of understanding. It will be a challenge to remain conscious of my existing biases in order not to carry them unknowingly into an interview, or to simply transfer my own impressions onto the data I collect. I cannot unburden myself of my years of collected assumptions, but I can have a critical eye in regard to them.

#### **4.3.2. RepGrid inquiry**

Personal construct psychology is a paradigm that holds that people continuously construct the meaning of their realities according to the interrelationships among their life experiences. Constructs are ways that individuals interpret the world around them; they are perceived patterns of events that are formed by individuals through ongoing life experiences, according to George Kelly (1955, as cited in Abrams, 2002b and Abrams & Meadows, 2005).

Since constructs organize and influence our daily lives, but are largely tacit (unconscious), Kelly developed several methods to identify and analyze constructs within his paradigm of personal construct psychology. One method, the Repertory Grid Technique (RepGrid), has been developed into a user-interactive, computer-generated program that “can distinguish properties between contrasting sets of experiences which may not otherwise be considered or articulated” (Abrams, & Meadows, 2005, p. 473). In order to find my unconscious constructs or biases about music-centered GIM, I engaged a consultant with whom I undertook a RepGrid analysis of the questions: What is my experience of music-centered GIM sessions? How am I defining music-centered GIM?

For several weeks I conducted the preliminary work necessary to select material for the RepGrid inquiry. I culled through transcripts and chose ten GIM sessions: five I characterized as music-centered; five as not music-centered. I chose these representative examples from my clinical practice to be as varied as possible in regard to the following variables: age, severity of diagnosis, length of treatment, phase of treatment from which the session was taken, and type of session given. I chose ten sessions, good in regard being representative examples from my practice, but on the day of the RepGrid process I discovered, to my dismay, that I had only chosen one male client (although I do not believe that gender would have made a difference in regard the results of the RepGrid; three male, seven female clients would have been a more accurate gender representation of my private practice).

A consultant helped me with the RepGrid inquiry from the beginning to the end of process. Initially, he made recommendations for selecting the clinical sessions – how many and what kind. He helped me set up and begin the WebGrid online procedure by designating the ten sessions as elements, and helped me understand how to create constructs. He helped during the procedure with a few questions, and at the end of the procedures assisted me in saving the data safely. In a separate phone consultation, he aided me in evaluating the results.

The RepGrid session was conducted on my office computer using “WebGrid,” a free online version of RepGrid. On the day of the procedure, I approached the RepGrid with the underlying question I wanted to answer: *How am I defining music-centered Guided Imagery and Music?* I designated the ten GIM sessions as elements, and named them. Then, using the RepGrid program of triad elicitation I created twenty-three statements (constructs) about the sessions. Twenty of the twenty-three elements were spontaneously elicited. Three constructs

were added at the end: "Session is music-centered/not music-centered," "I am music-centered/not music-centered," and "Client is music-centered/not music-centered." The online procedure with the WebGrid program took approximately 3 hours.

### **Outcome of the RepGrid analysis**

The RepGrid analysis was to help me discover 1) Which of my twenty-three statements about music-centered GIM were the most central, and hence, the most prominent in my unconscious thoughts, and 2) Which additional statements were closely related to the central statements and what was the relative importance of other, less important, statements to the central statements in my unconscious thinking.

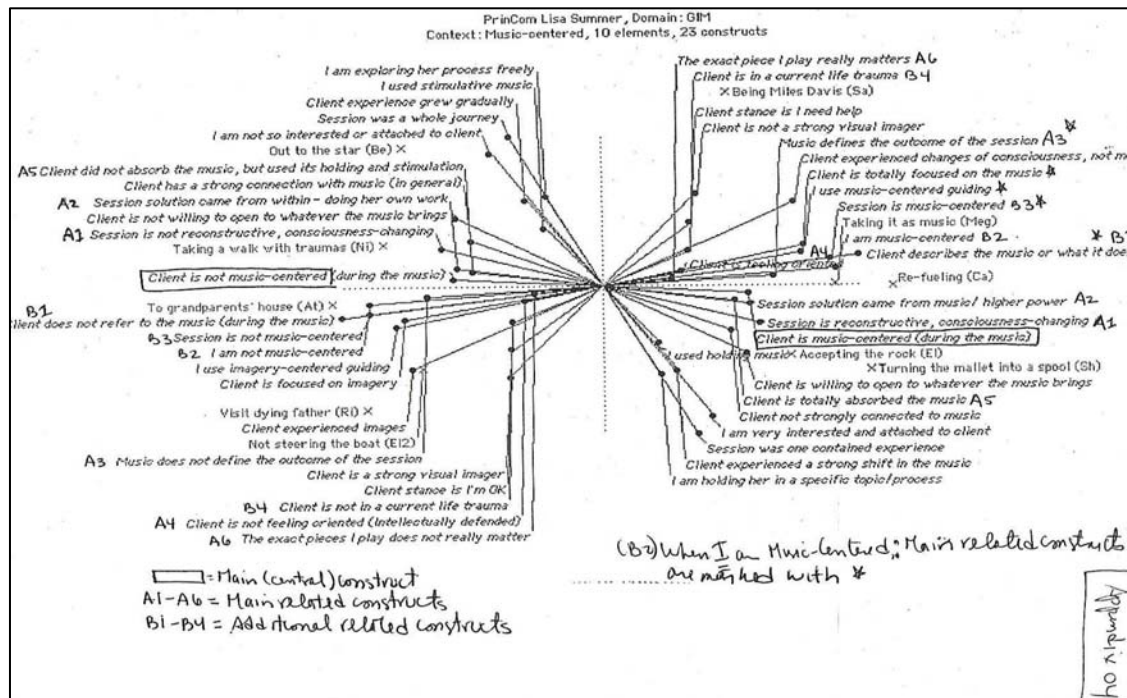
#### ***Central Construct***

The results of the RepGrid showed that there was only one central construct to my inquiry: client is music-centered/client is not music-centered. This means that I tend to designate sessions as more music-centered when the *client* is music-centered, not when *I, myself*, am music-centered. In fact, this confirms my suspicions from the preparation phase of the RepGrid.

#### ***Main Component***

The RepGrid program bundles constructs together into components. The constructs that are bundled with the central construct are of primary interest as they are most closely related to it. Six of my constructs are grouped very closely to the main construct, and four additional constructs form a second group bundled nearly as closely. These ten constructs form a component. RepGrid bundled my twenty-three constructs into nine components. Of these nine components, the first component was rated with an extremely high variability: 53%.

The attachments in the appendix show several versions of the RepGrid results in graph and numerical form (see appendices C-F). In the PrinCom Mapping (see Figure 4.1/Appendix D), all of the constructs on the right of the (unnamed) vertical axis are related to the session being music-centered. The constructs to the left of the vertical axis are related to the session being not music-centered.

**Figure 4.1: RepGrid Princom Mapping**

The extent to which a session was clearly music-centered was a function of the following six constructs which form the central, or primarily related component:

- That it was reconstructive, rather than consciousness raising
- That the session solution came from the music/higher power, rather than from within/client doing her own work (humanistic/transpersonal rather than psychodynamic)
- That the music defined the outcome of the session
- That the client was feeling oriented
- That the client was totally absorbed in the music
- That the exact piece I played really mattered

*Secondary component.*

There are four additionally related properties of the session that form a secondarily related component. They are:

- That the client described the music (or what it did) directly
- That I was music centered
- That the session was music centered
- That the client was in a current life trauma

*Summary*

When the client is music centered: the session is reconstructive, consciousness raising, the session solution came from music/higher power (humanistic/transpersonal), the music defines the outcome of the session, the client is feeling oriented, the client is totally absorbed in the music, and the exact piece I play really matters. When the client is not music centered: the session is not reconstructive, consciousness raising, the session solution came from within, doing own work (psychodynamic), the music does not define the outcome of the session, the client is not feeling oriented, the client did not absorb the music, and the exact piece I play does not really matter.

*Secondary construct*

It is also of interest to examine which constructs are closely related to the secondary construct: I am music-centered/not music-centered. The results show that when I am music-centered:

- The client describes the music and what it does directly
- The session is music centered
- The music defines the outcome of the session
- I use music centered guiding
- The client is totally focused on the music

*Additional constructs of interest*

Because music-centered GIM sessions are only one type of music and imagery session among the many that I utilize in clinical practice, a question that arose in this RepGrid procedure was: When do I make the choice to give a music-centered GIM session over other types of music and imagery techniques? In other words, are there certain indications that show me that a music-centered GIM is necessary? I identified seven of these indications during the RepGrid inquiry and used them as constructs.

For example, indications for the choice of music-centered GIM that I considered were as follows: whether the client was currently dealing with a life trauma; whether the client had a strong connection with music in their daily life; whether the client was more feeling oriented (as opposed to intellectually oriented); whether the client was focused on a particular issue in the therapeutic process; whether the client was in an open stance (by which I mean that the client is

open to any new perspectives that the music might bring). Other indications for the choice of music-centered GIM that I considered were in relation to my therapeutic intention for the client; whether my intention was to create one contained experience, as opposed to a more traveling journey for the client and in regard my relationship with the client; whether I was very interested in and/or attached to the client.

Each of these seven considerations or conditions was a construct for the RepGrid process; yet the RepGrid results indicated that only two were important in determining when I use music-centered GIM clinically. The first, “client is feeling oriented/not feeling oriented” was very strongly related. The second, “client is in a current life trauma,” was less strongly related. This means that I tend to utilize music-centered GIM when my clients are more feeling oriented and when they are in the midst of a life trauma.

### ***Best examples***

Finally it is interesting to examine which sessions were identified by the RepGrid inquiry as the best representations of a music-centered session and a not music-centered session. *Taking it as music* and *Re-fueling* were almost equally the best examples of a music-centered session. *Taking it as music* was a session in which “M” became completely absorbed in the GIM program and it transformed her approach to her life. She realized that she could take on life in the way, and as fully as, she had experienced the GIM program; riding, rather than resisting, the dissonant and tense parts of the music, and truly enjoying the aesthetic beauty of the each part of the music. *Re-fueling* was a session in which “C” experienced the music filling her like a car gets fueled with gasoline with an image that she was the car, and that she had extended a pump/funnel to God to re-fuel her essential life energy which had been depleted. *To grandparents house* was identified in the RepGrid analysis as the best example of a not music-centered session. In this session, “A” re-experienced her childhood memory of eating at her grandparents’ house, and received their feelings of unconditional regard that were a necessary component of her therapeutic process in addressing the conditional regard of her parents.

### ***Summary of self-inquiry: A broadened definition of music-centered GIM***

My working definition only described music-centered GIM through its technical procedures – repeated music and music-centered guiding. The RepGrid results brought to light several limitations of this definition. It identified that the central construct of my clinical thinking was: a GIM session is music-centered when the *client* is focused on the music, not when



the *therapist* is focused on the music. In addition, the RepGrid results identified six defining features of music-centered GIM and five of these features fall outside the purely technical working description. Three of the features were related to the client-music experience: the client absorbed the music, the music defined the outcome of the session, and the session solution came directly from the music. The fourth feature was related to the session outcome: the session was reconstructive. The fifth feature was related to a client characteristic: the client was feeling oriented and the sixth was a technique-related feature: the selection of the music really mattered.

These features can be integrated into a more thorough definition of music-centered GIM as it has been practiced by me. A GIM session is music-centered because the client and the outcome of the session (not the therapist) are centered upon the music. In music-centered GIM, 1) the client absorbs the music rather than just using it, 2) the client experiences a reconstructive, therapeutic solution that comes from a direct experience of the music without intermediary imagery and, because of this, 3) the music is what defines the outcome of the session. In music-centered

GIM, the client is usually feeling oriented and the choice of music is a critical factor.

#### **4.4. Pilot Study**

In order to develop the clinical protocol for the music-centered GIM session, the qualitative interview, and the data analysis, I conducted a pilot study with one participant, Riley who is a GIM Fellow with whom I had a pre-established supervisor/supervisee relationship.

##### **4.4.1 GIM session**

The prelude began with Riley reflecting upon her core issue: the recent surfacing memories of parental neglect of her and her siblings from her childhood. She wanted to face these childhood memories; however, she reported that whenever she tried to do this (when the memories come up) the feelings were so strong as to be destructive and fragmenting. Her primary thought was that she would get “stuck” in these strong feelings, and this was very scary for her. Riley articulated her desire to live life authentically and in the present, rather than reacting unconsciously to her memories of the past which caused her to feel alone and helpless. The prelude ended with her stating that she wanted to open and explore whatever feelings emerged with the music.

Subsequently, I asked Riley to center inward with her eyes closed while I chose music for the session. The following twelve pieces were selected as an initial pool of music from which I

intended to link together a music program with at least one repeated piece: Beethoven *Violin Concerto, movement 2*; Beethoven *Ninth Symphony, Adagio Molto*; Brahms *Violin Concerto, movement 2*; Copland *Rodeo, Corral Nocturne*; Debussy *String Quartet, movement 2*; Elgar *Enigma Variation, #9*; Faure *Requiem, Pie Jesu*; Grieg *Cradle Song*; Holst *The Planets, Venus*; Massenet *Scenes Alsaciennes, Sous les Tilleuls*; Pierne *Concertstuck for Harp*; Strauss *Death and Transfiguration*. The selection of this initial pool of music took about five minutes and when I had finished, I asked Riley to tell me about the state of her inner world. From her description, I chose the piece, *Scenes Alsaciennes (Sous les Tilleuls)* by Massenet as the initial piece in the music program. My goal was to meet and match her level of tension, and the emotionally charged state she had described with this piece of music and to “hold” her in this state. I conducted a short induction directing her to focus inwardly on the feelings and/or memories that were surfacing.

The linking of pieces for the session then proceeded in a spontaneous way. Table 4.1 lists Riley’s music program. The second piece selected was the *second movement* of the Beethoven *Violin Concerto*, and it was repeated. However, when this piece ended I did not find an appropriate piece in the pool of music to support her imagery experience; therefore, I chose two additional pieces spontaneously from outside the pool: Walton’s *Touch her soft lips and part* was chosen, and played five consecutive times after the Beethoven concerto to continue the process that was unfolding (as a working piece); the Vaughan Williams’ *Prelude on the Hymn Rhosymedre* was chosen next and was repeated twice to end the music experience. The decision about linking each piece and how many times to play each piece was made spontaneously. The total duration of the music program was 41:10.

**Table 4.1: Riley music program**

Piece	Times Heard	Duration	Total Duration
Massenet <i>Scenes Alsaciennes, Sous les Tilleuls</i>	1	3:44	3:44
Beethoven <i>Violin Concerto, mvt 2</i>	2	11:07	22:14
Walton <i>Touch her soft lips and part</i>	5	1:50	7:10
Vaughan Williams <i>Rhosymedre, Prelude</i>	2	4:01	8:02
			41:10

I used 14 guiding interventions: six were music-centered; eight were general. Music-centered interventions were: (Massenet) What does that do with the music? (Beethoven) And the

music? Is that with the music? (Walton) Is the music there? What does the music do with that? (Rhosymedre) And the music?

Riley had the following experience: [During Massenet] The music treated her painful memories that were surfacing with tenderness. She learned that memories could rise and flow because there was a force underneath them that assured that they would not get stuck. This taught her that there could be a steady, dependable flow to her emerging memories – that they would not get “stuck” and “cut” her as they usually did. [During Beethoven, two hearings] The memories became a flowing river and she became a tree which effortlessly soaked up the memories (a black lake). She merged with the music (the violin) and experienced the strength of her core. Then the violin became a laser and gave the skin all over her body a treatment to make it more permeable. When the laser became a bit too painful she had an “aha” experience: a feeling of total clarity, of openness and acceptance which led to its (the laser’s) transformation into a feeling of hope (an angel). She became the angel (like Tinkerbell) and spread this hope to others which was joyful, but soon it raised feelings of selfishness, and she separated from the music. [During Walton, five hearings] The first two hearings of the Walton diffused, and lightened, her sadness; the second two hearings, pulverized her sadness, and in the final hearing the sadness dissipated, escaping out of her new permeable skin. [During Vaughan Williams, two hearings] The sadness came out her pores as a mist, but could not be cleared away. This was difficult, but then the music brought her back to a more normal state of consciousness.

After helping Riley return to a more alert state of consciousness, she drew four mandalas (two at my request; two drawn spontaneously) and discussed the transformation that had occurred as a newly discovered process for dealing with her grief-filled memories.

This pilot session helped me to establish a specific protocol for each component of the GIM session: an initial set of instructions, prelude, induction with a strong “bridge” to the music; choice of initial music pool; choice of music program from the initial pool; choice of repeated music from the music program; use of music-centered verbal guiding interventions during the music; return; mandala drawing and postlude (see section 4.7 for GIM session protocol). However, this session also brought me an awareness about the complexity of defining music-centered GIM: not only did I need to clearly establish the music-centered protocol in each component of the session, but I also needed to respond to the client throughout the session in a music-centered way. In other words, both the session design and its implementation had to be

clearly music-centered. In addition, this pilot session influenced my decision to utilize a purposeful selection of participants who have a broad range of GIM experience (number of prior GIM sessions). This was because Riley, as an experienced GIM traveler, required only fourteen verbal guiding interventions because she already knew how to “use” the music program. Therefore, if I wanted to gain a broader perspective in regard to these interventions it would be beneficial to include several inexperienced GIM travelers in addition to several participants with an already advanced travelling style.

#### **4.4.2 Qualitative interview**

The pilot qualitative interview was conducted with no set structure or plan in order to spontaneously explore how to glean information from Riley about her music experience. The two-hour audiotaped interview took place after the GIM session, after a short period of rest; and a semi-structured follow-up telephone interview conducted three weeks after the pilot served to clarify some aspects of the interview and to gather additional information. The interview consisted primarily of a circular process that included listening to about forty-five seconds of the piece of music and reading the related part of the transcript. From this, Riley would spontaneously volunteer an initial comment about how she experienced the music, then I would follow up with additional questions.

The interview consisted of 117 verbal interventions: forty four were directly about the music; seventy three were focused upon Riley’s more general experience of the GIM session. An analysis of the 117 verbal interventions was undertaken in order to develop question categories for a semi-structured interview guide. Before the analysis, I examined typical qualitative interview question categories in Kvale (1996) and qualitative interview question categories relating to music (Pedersen, 2006). Eight categories emerged organically from the analysis of questions. Of these eight, categories one and two: Introducing and Probing, are identical to Kvale (p. 133); and categories three and six: Validating, Confirming, and Appreciating and Clarifying are similar to Pedersen’s “repeat/confirming” and “clarification of participant comments” (p. 239).

The analysis of the forty four music questions and the seventy three non-music questions yielded the same seven categories; the music questions yielded another category: Questioning Attention. Table 4.2 and 4.3 indicate the categories, frequency of use during the interview, and the ranked usage. Table 4.2 indicates that twenty-five percent of the comments and questions

involved piecing comments together (comparing, contrasting, synthesizing in order to make meaning). In addition, approximately thirty-three percent of the questions consisted of introducing questions (asking for basic description) and probing (teasing out additional information, looking for what was new and/or important).

**Table 4.2: Pilot interview: Analysis of music questions**

	<b>Music Question Category</b>	<b>Frequency of Use</b>	<b>Ranked Use</b>
1	Introducing	7	2
2	Probing	7	2
3	Validating, confirming, and appreciating	3	7
4	Structuring	4	5
5	Clarifying	5	4
6	Piecing together	11	1
7	Making meaning	3	7
8	Questioning attention	4	5
	Total Questions Asked	44	

Table 4.3 shows the analysis of the seventy three interview questions that were not directly related to the music experience; it indicates each of the seven categories of questions, the frequency of use during the interview, and the ranked usage. (Question category #8 above is not utilized here because it applies only to questions about the music experience.) The most significant number of non-music questions were the probing and piecing together categories; each category representing approximately thirty three percent of the total questions.

**Table 4.3: Pilot interview: Analysis of general questions**

	<b>General Question Category</b>	<b>Frequency of Use</b>	<b>Ranked Use</b>
1	Introducing	3	7
2	Probing	21	1
3	Validating, confirming, and appreciating	9	3
4	Structuring	5	6
5	Clarifying	9	3
6	Piecing together	20	2
7	Making meaning	6	5
	Total Questions Asked	73	

The main challenge of the pilot interview was keeping the interview focused directly upon the music experience and avoiding a re-processing, or a re-working, of the content of the GIM session. The outcome of the qualitative pilot interview was the Semi-Structured Interview

Guide: eight question categories with sample questions (see Table 4.5 for Semi-Structured Interview Guide).

#### 4.4.3. Data analysis

I approached the analysis of the pilot data in an unstructured way, without a specific strategy because I wanted to explore openly, I wanted to discover a valid strategy to interrogate the interview data I had collected. I made several attempts whose strategies failed: several attempts at coding and several attempts at a narrative distillation that failed. Needing a fresh approach, I returned to the audiotapes and immersed myself in listening again to the GIM session and to the interview. I spent considerable time reading and reflecting upon this material and summarizing the music experiences over and over again; many times. This process was as follows:

1. Segment. Segment the interview narrative into approximately eighteen units of music experience by reading and synthesizing the GIM session transcript and the interview transcript
2. Reduce. Reduce each unit of music experience from sentences into brief phrases which captured the essence of the experience with music.
3. Diagram. Diagram the short narrative units to show how they occurred, whether linear or simultaneous
4. An “aha” moment. The diagramming step elucidated a clear pattern which, when examined, elucidated the obstacle holding back the analysis: I was not distinguishing between “what” the participant had experienced in the music and “how” she had experienced it.
5. Re-examine: (second return to indwelling) Re-examination of the original GIM session material, the interview material, and the early narratives in light of the new perspective, looking at “what” and “how.”
6. Separate. Separation of “*What* the participant experienced during the music” and “*How* the participant experienced the music” into two distilled narratives.
7. Further diagram. A return to Step (#5) to diagram separately the “what” and “how” units of music experience elucidated two additional categories: “How *I understand* the participant’s music experience and “How the participant *understands* the music experience.”

This process was similar to the qualitative data analysis for a case-oriented analysis using a within-case approach described by Bruscia (2005): get a sense of the whole, make case notes,

cull raw data, segment, format, collaborate, code the data, display the data, and synthesize (p. 182-185).

#### **4.4.4. Findings**

##### **How Riley experienced the music**

[During Massenet and Beethoven first hearing]. She experienced the music as sad. She also experienced the music as tender and loving, and it brought her a new experience of a force (low tones) underneath the memories, and a new experience of flow (phrasing). This taught her that there could be a steady, dependable flow to her emerging memories – they would not get “stuck” and “cut ” her as they usually do. The experience of the flow deepened when the memories became a flowing black river and she, as a tree, soaked up the river with her roots. [During Beethoven second hearing] She merged with the music. The music became a laser (violin timbre) and it brought her a new experience of permeability (skin). At the moment when the laser felt too sharp, it brought her a special “aha” experience, in the form of an angel – that taught her that she could be open, trusting and hopeful. She/the angel transformed into Tinkerbell. [During Walton, five hearings] The music brought a feeling of lightness and taught her that the grief from her memories can be pulverized and then dissipate as a mist through the new permeability of her skin. [Vaughan Williams, two hearings] The music brought her back to a normal state of consciousness.

##### **How Riley understood the music experience**

The music taught her a new process for dealing with grief-filled memories when they emerge. In the follow-up interview she said, “the music taught me how to breathe with the feelings, and it gave me the actual music (Walton) to help me learn to do it.”

##### **How I understood Riley’s music experience: Emergence of an underlying pattern**

Riley experienced the music in her GIM session through a four-step process that occurred three times during the music. This process was:

1. *She felt emotional resonance with the music.* Some parts of the music felt resonant with her (she had an experience that is familiar; according to D.W. Winnicott, a “me” experience).
2. *The music expanded her consciousness.* Other parts of the music were not resonant; rather, those parts felt different from her and her attention was called to the new parts of the music. (she had an experience that is unfamiliar to her; her experience of herself is expanded, the music brings her a new perspective; according to D.W. Winnicott, a “not-me” experience)

3. The *music showed her a new solution*. The new parts of the music taught her something new (the music brought her a new psychological “solution” – it provided her with a new way to deal with an old psychological pattern).
4. The *music helped her to introject the solution*. The experience came inside her (part of the solution was psychologically digested by her)

Riley experienced a cyclical four-step procedure: resonance, expansion of consciousness, musical solution, and introjection that can be simplified as follows: She experienced some aspects of the music as similar to her and particular aspects of the music as different from her. When she focused on the aspects that were different for her, it expanded her consciousness and opened her to something new. Then the music taught her a new way to deal with an old problem. This “new way” was a new perspective on her old problem, but it was also much more than just a new perspective: the music actually taught her (or showed her through modeling) how to deal differently with her problem. And finally, this “new way” – a solution for her problem – was “digested” through an image.

The outcome of this analysis was a data analysis procedure for the study (see section 4.9 for data analysis procedure) that would yield answers to the three research questions of the study: 1) *How do the participants experience the music in MCGIM?* 2) *How do the participants understand the music experience in MCGIM?* 3) *How do I understand the participants’ music experiences in MCGIM?*

#### **4.5. Participants**

This study involves one therapy session with no follow-up treatment. Therefore, only well functioning adults with no history of mental illness were solicited since it was necessary to assure that all candidates would benefit from one isolated therapy session. In addition, I was seeking candidates with sufficient skills in emotional expression and communication who could provide rich descriptions of their music experience. Therefore, participants were recruited for this study using the following basic criteria for each individual:

1. Interest in self-exploration
2. Willingness for self-reflection
3. Verbal ability to express internal experiences
4. A high level of interest in experiencing music



The study utilized six participants. Despite this small size, I aimed to gather as diverse perspectives as possible. Therefore, my recruitment strategy was based upon selecting a group of six candidates who among them had 1) A wide range of experience as a GIM client (from advanced to naïve), 2) differing ways of relating to classical music (as a GIM therapist, as a music therapist, as a musician, as a non-musician), 3) a wide range of experience in verbal psychotherapy as a client (strongly psychologically-minded to psychologically naïve), and 4) gender balance.

Each of the six participants fulfilled the inclusion criteria. They examined and signed a consent form (see appendix G) prior to their participation in the study. The consent form included the agreement to participate in a GIM session, interview, follow-up telephone interview, and a final transcript review; willingness to be audiotaped during the GIM session and interview, and it indicated the option to withdraw from this study at any time.

Of the six participants, two were music therapist/GIM trainees with significant GIM experience; two were music therapists who were familiar with GIM, but not experienced (each had taken two GIM sessions); and two participants had no previous experience in GIM (nor in any kind of music therapy). The participants were three females and three males with an age range between 34 years old to 59 years old (average 41.6 years). Their main characteristics are summarized in Table 4.4.

**Table 4.4: Participant profiles**

Profile	Hillary	John	Nancy	Deval	Michelle	Bill
<b>Age</b>	37 years old	47 years old	34 years old	59 years old	38 years old	36 years old
<b>Employment</b>	13 yrs music therapist	17 yrs music therapist	12 yrs music therapist	mt student; 34 yrs professor	15 yrs admin special educ	2 yrs self-employed artist
<b>Music profile</b>	Voice, piano, guitar	Piano, guitar	Flute, bass	Compose, conduct, vln/viola	Dance, clarinet as child	Self taught guitar
<b>Music - daily use</b>	Minimal use For calming	Moderate use Listen, play; Grounding	Active use Listen, lessons ensembles	Active use Play, listen	Active use Sing, dance, listen	Moderate use Listen, play, with painting
<b>GIM</b>	36 sessions	2 sessions	60 sessions	2 sessions	None	None
<b>Therapy</b>	1 yr cognitive therapy	Brief art, verbal, family couple	None	7 yrs psychoanalysis, Gestalt-informed MT	None	None
<b>Core issue</b>	Recent miscarriage	Too driven	Self-critical w/ guilt	Self-critical w/repressed anger, sadness	Self-critical w/emotionally defended	Weight; anxiety related to career
<b>State in Prelude</b>	Anxious, disconnected	Anxious, stressed	Pregnant, self Doubt, fear	Mother's death; open	Neutral	Neutral

#### 4.6. Procedure and materials

Each of the six participants received an individual music-centered GIM session and a semi-structured interview, each lasting approximately 1 ½ hours. The GIM session and interview were each conducted by the researcher on the same day with an adequate rest period in between the two activities. The GIM session was audiotaped in its entirety, a written transcript of the music portion of the session was made during the session and subsequently transcribed (see appendices H-M). The interview was also audiotaped and transcribed (see appendices N-S).

The sessions were held at a site convenient to the participants; each was held in a comfortable room with a mattress, couch, or mat. An MP3 player with Klipsch speakers were utilized for the GIM session. The music programs were selected from the following repertoire of classical music: 1, 2, and 3 are from the traditional GIM repertoire; 4 and 5 list general repertoire outside the GIM programs; and 6-8 list pieces from three specific CDs.

1. GIM programs (Bonny): *Quiet Music, Caring, Comforting, Nurturing, Peak Experience, Positive Affect, Transitions, Serenity, Mostly Bach, Emotional Expression I and II, Relationships, Death-Rebirth, Affect Release, Group Experience, Imagery, Body Tape, Inner Odyssey*
2. GIM programs (Keiser-Mardis): *Grieving, Mythic-Mystic, Creativity II, and Expanded Awareness*
3. *Music for the Imagination*, a collection of ten CDs (Bonny & Bruscia, 1996)
4. General symphonic repertoire (includes chorus): Brahms symphonies, Beethoven symphonies, Mahler symphonies;
5. Additional specific pieces from the symphonic, chamber music, and concerto repertoire: Verdi *Requiem*, Strauss *Tone Poems*, Wagner *orchestral music from the operas (overtures, preludes)*, *Siegfried Idyll*, and Schubert *Piano Quintet in A*; and additional specific movements: *Mascagni Cavalleria Rusticana, Regina Coeli* Mozart *Symphony 34, movement 2*, Tschaikovsky *Violin Concerto, movement 2*
6. CD - *Meditations For A Quiet Night: Mendelssohn String Symphony No 4, 2<sup>nd</sup> movement*, Vaughan Williams *Fantasia on Greensleeves*, Pachelbel *Canon*, Delius *Florida Suite, By the River*, Elgar *Wand of Youth, Moths and Butterflies*, Sibelius *Pelleas et Melisande Suite, Slow Minuet*, Elgar *Sospiri*

7. CD - Elegy: Masterpieces for String Orchestra: Tchaikovsky *Elegy*, Fibich *Poem*, Grieg *Two Elegiac Melodies*, Puccini *Crisantemi*, Rossini *Une Larme (a tear)*, Lekeu *Adagio*, Reger *Lyric Andante*, Von Webern, *Langsamer Satz*, Bloch *Prayer for Cello and Strings*, Dvorak *Nocturne, Op.40*, Elgar *Elegy, Op.58*, Borodin *Nocturne*, Shostakovich *Elegy, Op.29*
8. CD - Bach/Stokowski Orchestral Transcriptions: *Bourree*, *Sarabande*, *Ein' feste Burg ist unser Gott*, *Air on the G string*, *Mein Jesu, was fur Seelenweh befallt dich in Gethsemaine*, *Preludio*

#### **4.7. Music-centered GIM session protocol**

The music-centered GIM session consisted of the traditional five components of a Bonny Method of GIM session: prelude, induction, music imaging, return, and postlude (Bruscia, 1998b, p. 12-13). Several modifications to these components were made for this study. The aspects that are particular to music-centered GIM are underlined in the description below.

##### **4.7.1 Prelude**

The therapist briefly defined music-centered GIM. The following information was gleaned from the participant: current life issue or pressing concern, current state (thoughts, feelings, sensory/body awareness), level of tension, readiness to address tension (issues), familiarity with the GIM process and psychotherapy (and material from prior sessions), and the nature of the relationship with music. This information framed the review and choice of music.

##### **4.7.2. Preliminary Music Choice.**

Before the music selection process began (approximately ten minutes), the participant was directed to close her eyes and to use the ten minutes to center inward. The participant's current state was then translated into musical elements (melody, harmony, rhythm, tempo, timbre, range, dynamics, and phrasing) during a visual scan of the music repertoire list in an MP3 player (see music repertoire in section 4.6). This scanning process took approximately ten minutes. During the repertoire scan, each piece whose musical elements were felt to be a possible match for the participant was identified and given a short hearing using headphones (approximately 5-10 seconds). After listening to each excerpt, the piece was either accepted or rejected for an initial pool of music of approximately fifteen pieces for the session.

After choosing the pool of music (prior to selecting the opening piece of music and the induction), there was a short dialogue with the participant to further ascertain her current internal

state. This provided additional information used for the selection of the initial piece and for the induction. When the choice of an initial piece was still difficult, a further music assessment procedure was implemented (with two of the six participants): an approximately 30-second excerpt from two or more of the preliminary music choices was played for the participant and s/he was asked to listen, and then to verbalize a response to the excerpt.

#### **4.7.3. Induction**

The induction consisted of three parts:

1. A progressive relaxation technique was conducted
2. A focus, a starting place for the music experience, was given. The focus was a “here and now” induction with elements gleaned from the prelude material.
3. A bridge to the music: for example, “The music will bring you something today. . . allow yourself to really open and listen to the music.”

#### **4.7.4. Music program.**

A music program that consisted of an opening, working, and closing section, was created from the preliminary pool of music. Music programs varied between one and five pieces.

##### *Opening Section*

The first piece of the program was selected to match the participant’s “here and now” internal state at the end of the prelude. “In a GIM session the music therapist assesses the current emotional state of the client, and then chooses a classical music program which will first match that state in sound” (Summer, 1992, p. 49). When the therapist provides the participant with an auditory environment, a therapeutic “musical space,” reflective of the internal world it serves to direct the client’s attention to the internal state, rather than to the expression of external problems (Summer, 1994). When this match is “good enough,” it becomes a holding device: a sympathetic musical structure with which client can identify, and onto which she can project her internal experiences. This is felt, by the client, to be a “me” experience (Winnicott, 1969) in sound that allows the participant to develop a trusting, non-defensive stance towards the music. This is crucial in creating a receptive attitude toward the music, so that the participant can more likely become “one” with the music (Summer, 1992, 1994). Bonny states, “. . .at the beginning of a listening experience best results are obtained when the mood of the music matches the mood of the listener. . . It is as if the mind and feelings are vibrating at a certain frequency and are most satisfied with music that is attuned to that frequency” (Bonny & Savary, 2004, p. 19)

### *Working Section*

Subsequent decisions about which piece to select from the music pool were made using a two-step decision making process. First, the decision to either repeat the piece or select a different piece was made. The main consideration in this selection process was to match and support the unfolding experience of the participant: whether to “hold” or deepen the experience at hand through a repetition of the piece or to provide additional stimulation or challenge in the form of a different piece of music. Bonny states, “Music may be used either to sustain a mood or to alter it (Bonny & Savary, 2004, p. 20). This decision making process took place near the conclusion of each piece. When the decision was made to select a different piece, it was chosen from the preliminary pool. This decision making process can be likened to Winnicott’s description of “good-enough” mothering (1969) in which the mother “provides the child with new and challenging ‘not-me’ experiences” that “expand his abilities, behaviors, and feelings – expand his sense of being in the world” (Summer, 1992, p. 47). By “good-enough,” Winnicott means that the tension provided must not be too frequent or too threatening, nor should it’s presentation be too infrequent or weak. “The structure of the music itself will continue to support the sense of comfort gained in the first [piece], the ‘me’ experience, while simultaneously compelling the client’s movement into new, and possible unconscious, territory – the ‘not-me’ experience” (Summer, 1992, p. 49). A “not-me” experience in sound is one that contains significant tension and development of its musical elements such as melody, harmony, rhythm, tempo, timbre, range, dynamics, and phrasing. The aesthetic tension inherent in the music’s development invites, stimulates, and challenges the participant into further, deeper exploration.

The working section is the main section of the music program and it usually contains several pieces of music. A piece may be chosen as a “resting” piece if needed by the client; otherwise, each musical selection is chosen with the intention to urge the client further into whatever tension is emerging.

### *Closing Section*

At times, the imagery experience comes to a natural conclusion at the end of a “working” piece of music. However, it is often necessary to provide a final piece to activate closure. In this case, a short piece with little to no musical development is usually the most helpful. Whether it

is a working piece or a short closing piece, the final selection of music must provide an adequate ending for the participant's imagery.

The parameters of music selection established for purposes of this study were that: 1) at least one selection would be repeated at least once, 2) a selection could be repeated more than once, and 3) the total music program should be no longer than 50 minutes.

#### **4.7.5. Music imaging with music-centered guiding interventions**

During the music, the participant reported his/her responses to the music at regular intervals. The therapist utilized primarily music-centered guiding interventions in order to bring the participant's attention to the direct experience of the music. The music portion of the session was 20-45 minutes.

#### **4.7.6. Return/Postlude**

The therapist helped the participant return to an alert state of consciousness. The therapist helped the client to articulate, explore, and reinforce any significant experiences that emerged.

#### **4.8. Qualitative interview protocol**

The interview utilized a semi-structured procedure with the aid of the interview guide created in the pilot study to help the participant describe 1) what she experienced in regard the music, 2) how she experienced the music, and 3) how she understood her music experience. To the extent possible, I allowed material to emerge naturally from the participant simply by playing music excerpts and reading the transcript of the GIM session. The interview was audiotaped. The phases of the interview were as follows:

1. Beginning phase: A discussion was held to facilitate the transition from roles in GIM session (client/therapist) to roles in interview (interviewee/interviewer) and to prepare the interviewee for the nature of the interview.
2. Working phase: I played approximately one-minute excerpts of each piece of music from the session and read sections of the written verbatim transcript. After listening to the music and a transcript excerpt, the interview guide was utilized to solicit descriptions of the music experience from the participant. This working phase of the interview took up most of the 1 ½ - 2 hour interview and it proceeded by alternating back and forth between the procedure of listening/reading and questioning over and over again.

3. Ending phase: The interviewee was questioned to see if she had comments, questions, whether she was ready to conclude. A discussion brought closure to the interview material; a follow-up telephone appointment was scheduled.

The Semi-Structured Interview Guide (see Table 4.5) was developed from the insights gained in the pilot interview. The eight question categories were those that emerged from through the analysis of the 117 pilot interview questions and the sample questions were taken directly from the pilot interview transcript.

**Table 4.5: Semi-structured qualitative interview guide**

Semi-Structured Qualitative Interview Guide		
Qualitative Interview		
<b>Beginning of interview: Transition from GIM session</b>		
<ol style="list-style-type: none"> <li>1. Are you ready to switch roles from being a client to looking directly at how you experienced the music in your session?</li> <li>2. Explanation of the process: listen to music, read from the transcript, answer questions regarding: how you experienced the music, and how you understand the experience; use mandala, as necessary</li> <li>3. Explanation of the goal: Working together for clear descriptions and co-constructing understandings (meanings) about the music experience</li> </ol>		
<b>Working section: Examining the music experience</b>		
<ol style="list-style-type: none"> <li>1. Listen to music excerpt and read from the transcript</li> <li>2. Ask questions from the following eight question categories:               <ol style="list-style-type: none"> <li>a. Introducing questions. These questions ask for description and/or allow answers to emerge.</li> <li>b. Probing questions. Questions for teasing out additional information, to look at what is new, and to pay attention to the important aspects</li> <li>c. Validating, confirming, and appreciating questions/comments. To reinforce the participant's comments.</li> <li>d. Comments that structure the interview. To move forward in the transcript, or to return to a previous part of the transcript; or to return to a previous topic</li> <li>e. Questions to clarify the participant's comments. For my understanding of the participant's comments.</li> <li>f. Piecing together comments. Comments/questions that compare, contrast, or attempt to synthesize comments or other material. This is preliminary to making meaning.</li> <li>g. Making meaning from comments. Comments/questions that help to understand, to gain insight.</li> <li>h. Questioning attention. Questions to ascertain whether there was a direct focus upon the music.</li> </ol> </li> </ol>		
	Question Category	Examples of questions
1	Introducing	What was your experience of the music then? Do you remember anything about the music there?

		So, what was it (the music) to you?
2	Probing	So, the connectedness of the phrases was important. Can you say anything about how it (the music) did that?
3	Validating, confirming, appreciating	Please say that again. You could see it.
4	Structuring	Do you want to hear the beginning (of the piece?)
5	Clarifying	As that was happening, were you seeing the music? So, your experience of it having nothing to do with the music; was it like you left the music? You felt the push (in the music)?
6	Piecing together	And how did that part of you know what to do with the music? That experience had nothing to do with the music; was that simultaneous with the feeling of selfishness? That music right then embodied that experience of grief and sadness?
7	Making meaning	So it (the music) diffuses (the wounds) for them? Does this make you curious about the music?
8	Questioning attention	At that time was your attention on the music? At the beginning you were focused on the music and hearing the lightness in the music?

#### Ending of interview

1. Do you have any questions?
2. Is there any other information you would like to give me about your music experience?
3. Are you satisfied with your responses?
4. Do you feel ready to conclude the interview?
5. Schedule the follow-up phone call

#### Follow-up Telephone Interview

1. Please describe your current, and past, relationship with music (active music making and/or listening).
2. Please describe your relationship with music as you have experienced it in your GIM sessions prior to this study. How was your music experience today similar or different?
3. Were you aware of the repetition of the music and the music-centered interventions during your session? How did you experience these?
4. Please give some context for the issues that came up in your GIM session; explain how the emotional issue you addressed in your GIM session relates to your general personal growth, or therapeutic, process.
5. Schedule the date to send the verbatim transcript for review

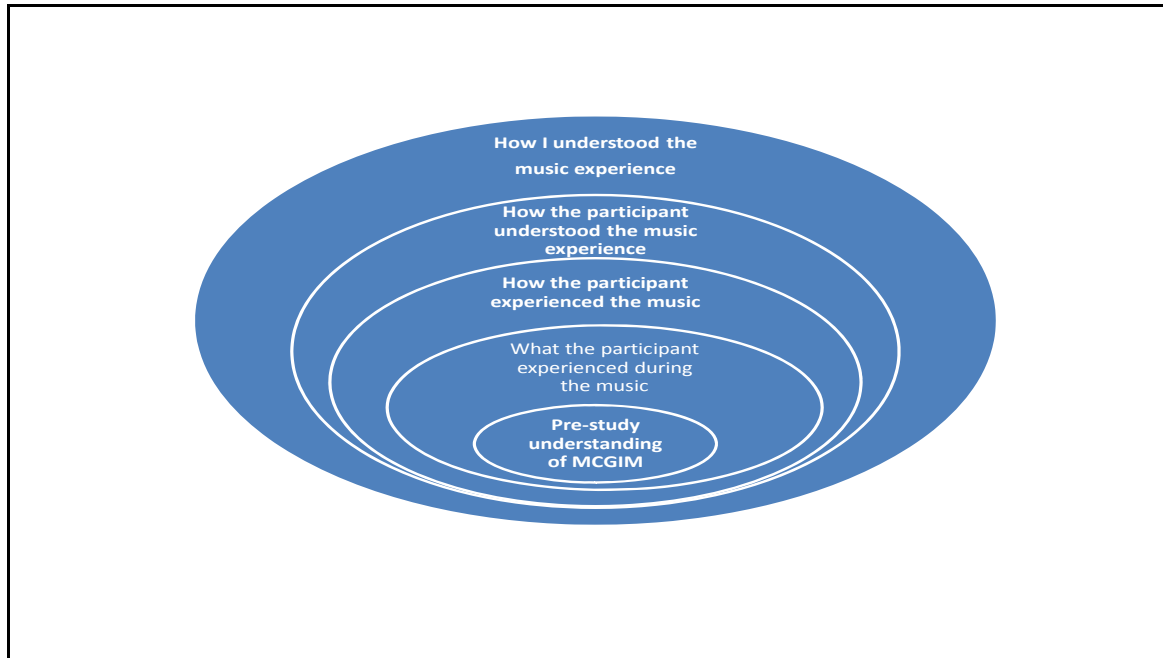
#### 4.9. Data analysis

The data consisted of the audiotaped GIM session, the GIM session transcript, the audiotaped interview, and the written interview transcripts. The hermeneutic approach was “an open-ended and circular process” used to seek increasing levels of understanding through interpreting the data (Kenny et al, 2005, p. 347). The hermeneutic spiral is a systematic process of analysis that is characterized by a spiraling analysis between various layers of data interpretation. It can also be characterized by an alternating spiral between specific parts of the analysis and the analysis of the whole phenomenon being studied. In this case, the part influences the whole, and the



subsequent new understanding of the whole is incorporated into the next analysis of the specific part. My pre-study definition of music-centered GIM is the initial layer of understanding; this is followed by four layers of data as diagrammed in Figure 4.2.

**Figure 4.2: Layers of data analysis**



Initial transcripts were created as follows:

### **Creation of transcripts**

1. Completion of a verbatim transcription of the GIM session
2. Extraction of “technique” data (repeated music, music-centered interventions)
3. Completion of a verbatim transcript of the interview
4. Extraction of the interview questions from the transcript
5. Deletion of unnecessary details from the interview transcript
6. GIM session transcript and interview transcript sent to participant. Verification of the interview transcript by the participant; revisions made, as necessary

Subsequently, the data analysis for this study was divided into two parts: a vertical and a horizontal analysis as follows.

#### **4.9.1 Vertical analysis**

The vertical analysis examined four successively deepening layers of understanding (called Levels one through four, VA). Each layer was derived from the examination of unfolding “plots”. Layer One (VA) was derived from the unfolding plot of the GIM session. To glean

meaning from the GIM session, the data was interrogated with the question, “*What* did the participant experience?” The analysis included a back and forth process between the audiotape and the written transcript.

Layer Two (VA) was derived from the participant’s re-experience of the plot of the GIM session in the interview with attention to the music experience. To glean meaning from the data derived from the re-hearing of the GIM session, the question, “*How* did the participant experience the music?” was posed. The analysis included a circular process that related the GIM session material and the interview material.

Layer Three (VA) was derived from the participant’s reflection on the GIM re-hearing. This was obtained by interrogating the data with the question, “How did the participant *understand* his or her music experience?” This analysis utilized a reflective process with back and forth comparisons of elements from the first and second layers of meaning to yield a third layer.

Layer Four (VA) was derived from the understanding gained through the further circling among the first three layers of data while focused on the question, “How do *I* understand the participant’s music experience? These three layers of data became integrated into my own perspective. The following steps give additional details in regard each level of vertical analysis:

1. Creation of a narrative that identified “what” the participant experienced from the GIM session transcript and the interview transcript (Layer One VA)
2. Creation of a narrative that identified “how” the participant experienced the music from the GIM session transcript and the interview transcript (research question 1; Layer Two VA)
3. Clarification of the “what” from the “how” statements by returning to the GIM session and interview material again and again
4. Distillation of each narrative to its most essential features (as many times as necessary)
5. Segmentation of each narrative into corresponding units of music experience
6. Reduction of each unit of music experience into brief phrases (as many times as necessary)
7. Diagram of the units to show how they occurred
8. Creation of a narrative that identified “how the participant understands” the music experience from the interview transcript (research question 2; Layer Three VA)
9. Clarification of “how the client experienced” from “how the participant understands” (keep research questions 1 and 2 separate; keep separate Layers Two and Three VA)
10. Review of GIM session and repetition/re-creation of steps 6-13 again and again

11. Interrogation of the narratives and diagrams for meaning, asking, “How do I understand this music experience”? (Layer Four VA)

12. Creation of music episodes (research question 3)

#### **4.9.2 Horizontal Analysis**

The horizontal data analysis had three layers (called layers one through three, HA). There was no need to integrate the six participants’ first layer of data (their individual GIM session “plots”). Therefore, Layer One (HA) integrated the six participants’ second layer of data (Layer Two, VA): *how* participants’ had experienced the music in their GIM session. Layer Two (HA) accomplished the integration of the six participants’ third layer of data (Layer Three, VA). However, it became clear that the previous layer could easily be subsumed under this layer. Therefore Layer One (HA) and Layer Two (HA) were merged together as Layer One/Two (HA). This merging of the two layers made sense considering the fact that Layer One represented the descriptive elements of the music experience itself and Layer Two represented the understanding of the music experience. Therefore, the descriptive layer was actually already included within its understanding. Since I was moving away from description towards a more comprehensive understanding of the client perspective, it did not seem meaningful to keep these two layers of data separate any longer. Layer One/Two (HA) used a circular process that re-examined Layers One-Three (VA) to assure that this horizontal analysis yielded an integrated client perspective that was as close as possible to the unique individual perspectives.

Layer Three (HA) accomplished the integration of my perspectives on the six participants’ music experiences. This culminating analysis used a circular process that re-examined Layers One-Four (VA) as well as Layers One/Two (HA). An additional element of this hermeneutic process was the innumerable and hence, unreportable, repetitions of the return to the more basic layers of data. The following steps give additional details in regard each level of the horizontal analysis:

1. Interrogation of the narratives “how the client experienced” and “how the participant understand” asking, “What did “X” feel was key to the music experience?” (research questions 1 and 2 combined; Layers One/Two HA)
2. Juxtaposition of key statements from each participant; consolidation into themes; themes related back to each participant (research question 1 and 2)

- 3.** Juxtaposition of music episodes from each participant; synthesis of ideas into conclusion  
(research question 3; Layer Three HA)

## Chapter 5: Results – Vertical Analysis

The data for this study was collected from the participants' individual GIM sessions and interviews. This chapter gives a full report with three sections for each participant's vertical case. The first section presents a profile of the participant. It includes a description of the relationship with music, therapeutic history, and identifies the emotional issues that were relevant at the time of the GIM session.

In the second section the components of the GIM session are explained to provide a therapeutic context for the analysis. The components include: prelude, initial music selection, induction, music program, verbal guiding during the music program, return from the altered state of consciousness, mandala, and verbal discussion from the postlude. An extended description called "music imaging" is the heart of the session. It is based on the session transcript (see appendices H-M) and tells the unfolding plot of the participant's imagery. In Nancy and Deval's report, an extra – briefer – summary is included because of the complexity of the imagery in their sessions. This layer of data explains *what* each participant experienced during the music program. In order to understand the participant's session within a therapeutic context, my clinical interpretation of each session is offered (therapist's summary of GIM session).

The third section in each case is based on the interview transcript (see appendices N-S) and its relation to the GIM session (see section 4.9 for a complete description of the vertical data analysis). This section in each case study presents three layers of analysis that correspond, respectively, to the three research questions: how the participant *experienced* the music, how the participant *understood* the music experience and finally, how *I understood* the music experience. To conclude, a summary statement of each participant's relationship with the music is presented. Table 5.1 (same as Table 4.4) gives, in brief, some of the relevant characteristics of the participants.

**Table 5.1: Participant profiles**

<b>Profile</b>	<b>Hillary</b>	<b>John</b>	<b>Nancy</b>	<b>Deval</b>	<b>Michelle</b>	<b>Bill</b>
<b>Age</b>	37 years old	47 years old	34 years old	59 years old	38 years old	36 years old
<b>Employment</b>	13 yrs music therapist	17 yrs music therapist	12 yrs music therapist	mt student; 34 yrs professor	15 yrs admin special educ	2 yrs self-employed artist
<b>Music profile</b>	Voice, piano, guitar	Piano, guitar	Flute, bass	Compose, conduct, vln/viola	Dance, clarinet as child	Self taught guitar
<b>Music - daily use</b>	Minimal use For calming	Moderate use Listen, play; Grounding	Active use Listen, lessons ensembles	Active use Play, listen	Active use Sing, dance, listen	Moderate use Listen, play, with painting
<b>GIM</b>	36 sessions	2 sessions	60 sessions	2 sessions	None	None
<b>Therapy</b>	1 yr cognitive therapy	Brief art, verbal, family couple	None	7 yrs psychoanalysis, Gestalt-informed MT	None	None
<b>Core issue</b>	Recent miscarriage	Too driven	Self-critical w/ guilt	Self-critical w/repressed anger, sadness	Self-critical w/emotionally defended	Weight; anxiety related to career
<b>State in Prelude</b>	Anxious, disconnected	Anxious, stressed	Pregnant, self Doubt, fear	Mother's death; open	Neutral	Neutral

## 5.1. Hillary

### 5.1.1. Profile

Hillary is a thirty-seven year old female. She has been a music therapist for thirteen years and is currently enrolled in a music therapy graduate program and conducting music therapy sessions at a hospital approximately ten hours per week. She is in GIM training and conducts one practice GIM session per week.

Hillary is a vocalist and pianist, and plays guitar. For many years she earned a living as a musician, playing in a duo. Although she does not currently use music for personal growth, Hillary consistently sings or hums to calm herself down, and often dances to music with her son.

She was in cognitive verbal therapy for one year approximately fifteen years ago, and has taken only sporadic single verbal therapy sessions since that time. The main theme from her prior therapeutic work was self-acceptance (“re-parenting myself”). She has had fourteen personal GIM sessions as part of her GIM training, and twenty-two personal sessions prior to her GIM training and these, thirty-six total so far, sessions are ongoing. Hillary described as an issue her tendency to hide from active and/or challenging music in her BMGIM sessions and hoped that this session might help her understand more about her reactions to music. Hillary experiences music in her BMGIM sessions as being in the background. She does not usually pay attention to music during her BMGIM sessions except when there is discomfort with it, and then

her attention is fully on the music. Her usual mode of travel is to focus either on feelings or on visual imagery, but not both together. Her two strongest music experiences in GIM both involved feeling connected to the universe. In one experience she was aware of the music propelling the images and creating the intensity; in the second experience she felt she had *become* the music.

Hillary brought the following emotional issues into this session: 1) she has had three miscarriages in the past, and just recently had a fourth (in fact, she was still receiving follow-up medical testing). She had been unable to take any time for herself to deal with the miscarriage after it happened (“every minute is accounted for”) and she felt “disconnected;” 2) she felt anxious, anticipating feeling overwhelmed by people and activities at a conference she was attending.

Hillary wanted to use this GIM session in an exploratory way – not focused on a specific topic and also with the idea of learning more about her issue with strong music. However, at the end of the prelude she expressed a specific goal: to try to accept the disconnected state she had been feeling in her daily life.

### **5.1. 2. GIM session**

#### **Prelude**

Hillary stated her core issue: being disconnected from herself due to recent miscarriage. Her current state was anxious and upset with herself – and not wanting to accept her current state.

#### **Initial music selection**

The following pieces were initially selected: Barber *Adagio for Strings*; Beethoven *Piano Concerto #5, movement 2*; Beethoven *Symphony #7, movement 2*; Faure *Pavane*; Copland, *Rodeo, Corral Nocturne*; Debussy *String Quartet, movement 2*; Elgar *Enigma Variation #9*, Holst *The Planets, Venus*; Mahler *Symphony #5, Sehr Langsam*; Massenet *Scenes Alsaciennes, Sous les Tilleuls*; Reger *Lyric Andante*; Schumann *Fünf Stucke im Volkston, Langsam*; Villa-Lobos *Bachianas Brasileiras #5*.

#### **Induction**

The induction consisted of 1) a progressive relaxation for the body: using the breath to “open;” 2) a here and now focus: “open, so you can find out where you are – without pressure;”

and 3) a bridge to the music: “there will be something in the music for today, so let yourself open and listen as deeply as you can to the music . . .”

### Music program

The music program for the session consisted of: Faure *Pavane*, Debussy *String Quartet, movement 2*, Copland *Rodeo, Corral Nocturne* repeated three times (see Table 5.2).

**Table 5.2: Hillary music program**

Piece	Times Heard	Duration	Total Duration
Faure <i>Pavane</i>	1	7:44	7:44
Debussy <i>String Quartet, Andantino</i>	1	7:41	7:41
Copland <i>Rodeo, Corral Nocturne</i>	4	3:59	15:56
Total Music Program			31:21

### Verbal guiding interventions

Hillary’s verbal guiding interventions are listed in Table 5.3. Thirty four guiding interventions were used; 20 were music-centered.

**Table 5.3: Hillary guiding interventions**

Piece	Music-centered Interventions	Imagery-centered Interventions	Total Interventions
Faure <i>Pavane</i>	6	2	8
Debussy <i>String Quartet, Andantino</i>	4	5	9
Copland <i>Rodeo, Corral Nocturne</i>	4	0	4
Copland – second hearing	0	5	5
Copland – third hearing	3	0	3
Copland – fourth hearing	3	2	5
Total	20	14	34

### Music imaging (see appendix H for full transcript of music imaging)

[During Faure] she felt happy. She was in field of flowers, looking around with curiosity. She saw herself as a pregnant Mary [mother of Christ], feeling all the hormones of pregnancy. The experience of being Mary was very full – she was completely in it. Suddenly she saw the image of a large ship in a stormy sea. This image was a picture in Mary’s mind – like it was really happening in a distant place and she was seeing it. So, the experience of being pregnant Mary in the field and thinking about the stormy sea became simultaneous. When she asked, “Is this storm what the baby was experiencing inside me?” the storm changed from being a thought and came inside her body. Then there was a feeling of waiting, like she was in between the field



and the storm. This turned into an image of a door which could lead either to the field or the storm, but she needed to wait to see which direction to go.

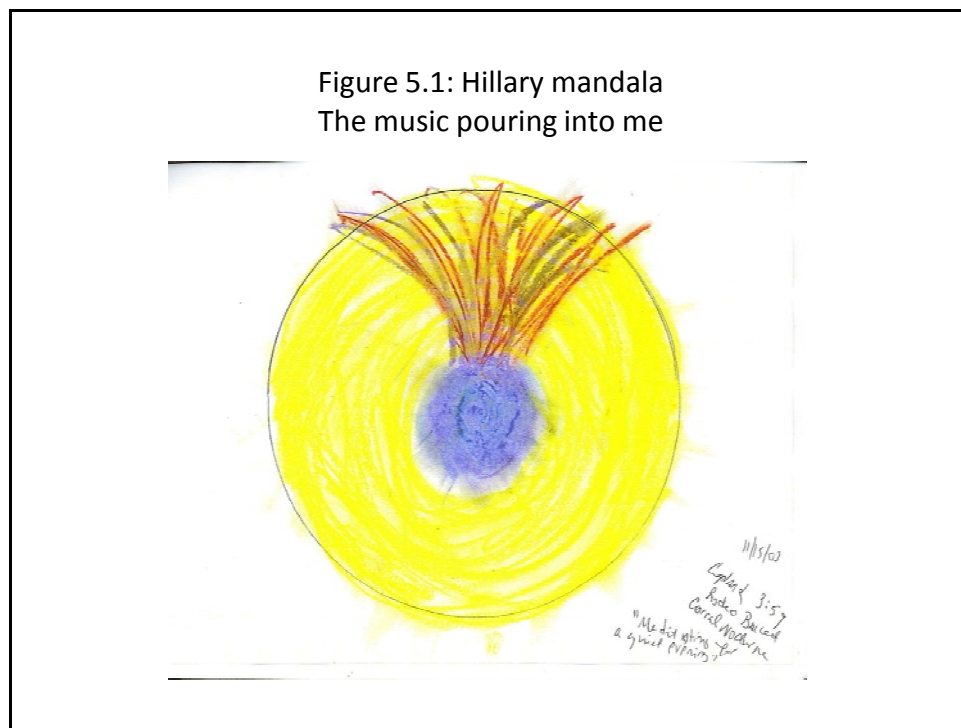
[During Debussy] she was walking through a dark cave with a heavy cloak around her. The cloak (the music) was propelling her forward. In an act that was both defiant and surrendering, she threw the cloak off. Then she became herself again; she was no longer Mary, nor was she pregnant. She was herself, feeling cold, lonely, and exposed. She went up and out of the cave, encountered a figure from a prior BMGIM session, and left him.

In the first [of four hearings of Copland], the music entered her head and filled her with strength. During the second hearing the music brought her a sense of who she really is, and the insight that she needs to accept who she is. In addition, the music brought her the message to “be still.” In the third hearing she experienced how crucial it was to be still and to accept who she is. She felt sad about this, and also realized how hard it was to accomplish. Towards the end of the third hearing she experienced the early American pioneers and felt how much effort and struggle there was in their lives. The fourth hearing brought a warm feeling, an image of repeated sunrises, and a brief flashback of the storm image which reminded her of life’s complexities.

### **Return/postlude**

Hillary drew a mandala (see Figure 5.1) a blue circle in the center surrounded by a larger bright yellow circle. From the top of the paper, bright red streaks break through the yellow circle and merge into the blue inner circle. She indicated, “The blue is me; yellow is the music; the red is the music pouring into me.” She titled it, “The Music Pouring into Me.”

Figure 5.1: Hillary mandala  
The music pouring into me



Hillary understood this session to be about her miscarriage. She experienced herself as pregnant with a distant image of a storm in her mind which came into her womb (Mary with a storm in her mind became Mary with a storm in her womb). She identified the essence of this session as receiving a “message” from the music: to be still, to accept herself, and to have hope. It gave Hillary insight into how she should proceed with her daily life and internal work: 1) she needs to be more “still” in her daily life; 2) she needs to accept herself more (the deeper self that she knows is truly her core); and 3) she needs to acknowledge that her day to day living is a struggle.

### **Therapist’s summary of GIM session**

Hillary came into the session avoiding her miscarriage and its impact upon her; she had become disconnected from herself and numb as a response to her miscarriage. A brief, symbolic re-enactment of the miscarriage including an act of defiance and surrender was followed by feelings of vulnerability and loneliness. Subsequently she found strength, and while listening deeply to the music and she became completely still and accepting of herself.

### **5.1.3. Vertical analysis** (see appendix N for full interview transcript)

#### **How Hillary experienced the music**

[During Faure] Hillary was carried along by the music. It sounded sweet, gentle, and supportive. When the music changed, it sounded masculine and felt separate from her. Some parts of the music carried her and some parts of the music were distanced from her, and she experienced both simultaneously. The music then came into her body (because of a thought – an association) and then she was in between these two experiences. She settled in to this waiting place, to listen to the music, to see in which direction it would ultimately take her.

[During Debussy] the music sounded dark, searching, and longing; it became a heavy cloak. She felt it as an authority and it had power over her. When she threw it off, she felt exposed and vulnerable to it. The music sounded frenzied, spiraling up; she had an association to a previous GIM session with this same piece of music, and then the music sounded like it was rocking.

[During four hearings of Copland] the music entered her head and filled her. It was outside her (above her) and talking to her as an authority while simultaneously being connected to her (flowing in to her). She felt both separate from it and a strong connection to it. When she felt sad, she felt the music being kind to her. She heard the struggle in the music and it touched her. At the end of the session, she had the same experience as in the first piece (Faure *Pavane*) when part of the music sounded like distant turmoil and brought the image of the storm. However, this time it was so brief that it came as a fleeting reminder of life's turmoil, and did not take her away from the main emotional experience which was more important to her.

### **How Hillary *understands* the music experience**

[During Faure] the plucking strings created the experience of walking through a field, and the uneven pulse sounded like curious looking around. She felt very close to the music, being fully in it. When the music changed, it changed her self-image and she became Mary, and pregnant with all the accompanying body sensations of pregnancy. Next, the instrumentation and volume changed, and the music sounded masculine. It felt far away, and this stimulated a stormy sea as a faraway image. The music created the experience of the simultaneous pregnancy and storm. Up until this point, the music was affecting her imagery, but what happened next was the opposite: the image (thinking of the baby in her womb) affected how she experienced the music. The music then went inside her body. When she felt the need to just wait to see the ultimate direction the music would take, she might have felt that the music was close to its ending.

[During Debussy] the music was a cloak, and she felt the push of the music physically, which felt like a push to search internally. She defied and surrendered to the music's pushing by throwing it off her, onto the ground. Then she felt exposed because the music could now see her. She heard the spiraling up in the music and then she realized that she had listened to this exact piece of music in her last GIM session and the figure from her last session returned but did not stay. Next, the melody and the pulse of the music created a rocking sensation.

[During Copland, four hearings] During the first hearing she merged with the music. It strongly compelled her to listen to it. Although the music was gentle, she experienced this as an authoritarian command. During the second hearing, because she had surrendered to the music, an insight came to her which she projected onto the music without realizing it. It came back to her when she heard it revealed in the music. Later, the melody in the upper range created a feeling of sadness and kindness. During the third hearing, she heard Copland's typical American musical language and associated it with a pioneering struggle. In the fourth hearing, she had the same experience as in the Faure *Pavane* when one part of the music felt close and created a full emotional experience while other parts of the music sounded like turmoil and created a thought/image. Of her experience in the Copland piece, she said: "My actual experience was that the music had given me a message, an insight . . . In the session I really felt that *the music* had revealed this insight to me, but upon examination, I realize that what I heard in the music was actually *me* having the insight. I actually had the insight but I had projected it onto the music. . . So, actually what happened was that I put my own authority/power into the music and then I found it in the music. . . It's a cycle: I put it into the music and it came back to me."

In the interview when Hillary discovered this cycle, it became an "aha" experience. She had gained an experiential, and comprehensive, understanding of how the music in her session served as a projective screen, allowing her to experience feelings and ideas that she could not otherwise feel. This was not a new perspective, but rather it was a very strong felt experience of something she already cognitively understood. She confirmed the importance of this understanding in the follow-up phone interview, reporting that this experience had changed all elements of her relationship with music: she approached guiding BMGIM sessions differently; listening to, and choosing, music differently and working with music therapy clients differently, all with a heightened awareness of music as a projective device. "I discovered a cycle in music

listening. It seems very simple, but it is very profound to me and it has changed the way I approach all listening experiences on my own and with clients.”

### **How I understand Hillary’s music experience**

Hillary’s experiences in the music can be seen through the psychological context that she brought into the session: her distance from her internal world. Within the main framework of the issue of distance versus closeness, her experiences can be briefly mapped as follows:

- When the music was distant, it brought a cognitive thought or a distant image.
- When the music was close, it brought a full emotional experience.
- When the music was too close, she defied it.
- When the music was very close 1) she merged with it, 2) the music poured into her body, 3) she experienced it as an authority that compelled her to listen to it, and 4) it revealed an insight to her (although she thought she heard it in the music, it was actually she who had the insight).

Hillary experienced six episodes of relating to the music (see Table 5.4). The linear progression of these shifts is important because each episode was a gradual shift in her relation to it, and each shift paved the way for the next episode to occur. Hillary’s first music episode in the Faure *Pavane* included closeness towards and distance from it. These experiences occurred separately and one occurred simultaneously (pregnant Mary thinking about a distant stormy sea). In the second episode during the *Andantino* from the Debussy *String Quartet*, when the music was felt as too close, she simultaneously defied and surrendered to it (it was a cape that she threw off onto the ground). After she had confronted the music in this way, she became vulnerable and lonely. In this state, episode three, she felt very closely connected to the music (and, concomitantly, with her internal world). This allowed the next shift to occur during the four repetitions of the Copland *Rodeo, Corral Nocturne*. In episodes four and five, she had a simultaneous experience of the music as outside her, talking to her as an authority while it was flowing inside her body. When the music poured inside her body, she introjected its quality of strength and stillness, and a message (a noetic<sup>1</sup> image) to stay still and accept herself. This

---

<sup>1</sup> Noetic refers to "inner knowing," a kind of intuitive consciousness—direct and immediate access to knowledge beyond what is available to our normal senses and the power of reason (according to the Institute for Noetic Sciences [http://www.noetic.org/about/what\\_is.cfm](http://www.noetic.org/about/what_is.cfm), retrieved 01/07/2009)

transformed her into a new state of: strong, still, and self accepting. Her initial rejection of the music's closeness that led to the subsequent deeper connection with it was crucial to this transformation. It is interesting to note that in the final hearing of the Copland movement there was a fleeting recurrence of the "distant" image (the stormy sea), as if to challenge the new state of consciousness, but when it occurred, she did not focus on it.

**Table 5.4: Hillary music episodes**

Music	#	Music Episodes	Description Episodes
Faure	1	Felt close and distance towards the music	She explored various close versus distance experiences until
Debussy	2	Defied and surrendered to the music	The music got too close so she pushed it away from herself. This distance put her in a vulnerable, lonely state during which
Copland x1	3	Connected to the music	She became very closely connected to the music and had a simultaneous experience in which
Copland x1	4	Introjected the music	The music poured into her body and
Copland x1	5	Submitted to the music's authority	She related to it as a powerful, trusted authority
Copland x2, 3, & 4	6	Was transformed by the music	The music changed her in several ways: a) she became strong, b) she felt still and connected to herself, and c) she understood she should accept herself as she is.

To summarize, Hillary's music-centered GIM session included gradual and successive shifts in her relation to the music that led to a transformational experience that was a process of projection-reintrojection with the music as an external authority figure. Her transformational experience was primarily noetic and somatic. She transformed her initial state of consciousness from distanced and disconnected to a close, connected relation to the music and in tandem to her internal world.

## **5.2. John**

### **5.2.1. Profile**

John is a forty-seven year old male, married, with children. He has been a music therapist for seventeen years and is trained in Nordoff-Robbins music therapy. His clinical practice with children uses improvisation (he uses no receptive music therapy techniques). Currently, he is an administrator/clinician at a music therapy clinic, and conducts about seven music therapy sessions per week.

John is a pianist, but also identifies himself as a guitar player and has played bass and cello. Improvisation is the focus of his professional life; therefore, his relationship with music is solely active, not receptive. He is invested in the clinical practice and theory of improvisation – he is always trying to understand music and his clients’ responses to it. In his personal life, John uses music to “get grounded,” and to feel good. He has never participated in music therapy sessions as a client. In order to reduce his stress and the “driven” feeling of his current life, he has begun listening to music on his iPod with noise reduction headphones on his train commute to work. Although he usually listens to music for structural elements, John can also get “swept away” in music. He does not remember ever crying with a piece of music.

His listening preferences are for piano music: Mompou and Bach Goldberg Variations; Classical music: Debussy, Copland, Ravel; early Beatles; rhythm and blues; and in general a wide variety of genres. He has a special affinity for vocal music, often feeling a “humanity” in the voice and the sense that “Oh, this person knows me.”

Although John’s only experience with GIM was two individual and one group GIM session approximately eighteen years ago, he has taken sessions in individual therapy, family therapy, couples therapy, and participated in an art therapy group. In regard his therapeutic process John has become comfortable with expressing emotions and can often be swept away with feelings, although he stated a fear of losing control of them. He expressed no long standing issues, but his current issues were 1) being too driven, 2) difficulty taking time for himself, and 3) job stress due to changes in responsibilities (recent cardiac screening related to this stress).

### **5.2.2. GIM session**

#### **Prelude**

John’s presenting state at the beginning of the session was emotionally torn due to several days of separation from his family; he felt not quite “present.” His stated goal was to be open to the music experience, rather than analytical. Because John’s relationship with music was improvisatory, I suggested that he approach the GIM session as he would approach listening to spontaneously improvised music – not knowing how the music would unfold.

#### **Initial music selection**

Nine initial pieces were selected: Beethoven *Symphony #7, movement 2*; Debussy *String Quartet, Andantino*; Rodrigo *Concierto de Aranjuez, movement 2*; Schubert *Piano Quintet in A, The Trout*; Schumann *Funf Stucke im Volkston, Langsam*; Tchaikovsky *Violin Concerto*,

*movement 2; Verdi Requiem Lacrymosa dies illa; Villa-Lobos Bachianas Brasileiras #5; Wagner Overture to Parsifal.*

### Initial music assessment

I was unsure about the choice of an initial piece for the music program, so I conducted an assessment of John's responses to two contrasting pieces from this list: the Schubert *Piano Quintet (Trout)* and Villa-Lobos' *Bachianas Brasileiras #5*. He felt the Schubert piece as "formal, from a different era" and in response to the Villa-Lobos he said he heard "beauty, and the humanness in the voice." I decided not to choose either of these two pieces, but from his reaction, I decided on a piece similar in form and musical language to the Villa-Lobos selection.

### Induction

The induction consisted of 1) a progressive relaxation for the body: to "settle in and open"; 2) a here and now focus: "on present feelings and especially a feeling of curiosity;" and 3) a bridge to the music: "there will be something for you in the music today."

### Music program

The initial piece on the music program was the Rodrigo *Concierto de Aranjuez, movement 2* and it was repeated once. After this repetition, it was clear that John's session had come to a natural conclusion, and so this movement, twice, was his program (see Table 5.5).

**Table 5.5: John music program**

Piece	Times Heard	Duration	Total Duration
Rodrigo <i>Concierto de Aranjuez</i>	2	10:31	21:02
Total Music Program			21:02

### Verbal guiding interventions

John's verbal guiding interventions are listed in Table 5.6. Twenty two guiding interventions were used; 14 were music-centered.

**Table 5.6: John guiding interventions**

Piece	Music-centered Interventions	Imagery-centered Interventions	Total Interventions
Rodrigo <i>Concierto de Aranjuez, mvt 2</i>	5	5	10
Rodrigo second hearing	9	3	12
Total	14	8	22



**Music imaging** (see appendix I for full transcript of music imaging)

[During the first hearing of Rodrigo] John had several responses to the music: a feeling of reaching out, of the wisdom of history, and a sense of “one” (an individual). The experience of the one individual divided into different entities that became a grandfather, father, and son. The grandfather spoke about important matters; and there were dialogues and episodes of passion, tenderness, and turmoil. In the end there was a return to the feeling of the “one,” of completion, satisfaction, and that “now” is the moment. The end was filled with emotions: he was jubilant, satisfied, and free.

[During the second hearing of Rodrigo] he once again had the experience of an individual insisting on expressing his individuality. The responses to the individual became dialogues including a romance between two people and a pleading between grandfather and grandson. The grandfather communicated his assurance that life is filled with turmoil, yet it is beautiful and worth living. He felt this assurance and there was a fusion of the grandfather, father, and son into one. Then the experience of the grandfather’s wisdom (that pain, sadness and turmoil are all a part of the beauty of life) deepened when he also felt it as physical sensations. He got swept away physically and felt intensely present. At the end he felt jubilation, glee, release, and a sense of completion.

**Return/postlude**

John drew a mandala (see Figure 5.2): several shades of brown and green form an uneven border around a circle, and the circle is completely filled with abstract figures drawn in shades of blues and greens, and there is one red spiral near the center. The figures form a circular pastiche of colored abstract figures that he titled: “The Passion and the Pleasure.”

Figure 5.2: John mandala  
The passion and the pleasure



In the postlude, John identified the essence of this session as the music experience in which he could “really be here for myself . . . letting go of what needs to happen next.” He felt the experience as a solution to his usually “driven” approach to his daily life. Although he had been intellectually aware of the need to be more fully present and less driven by stress in his daily life, the music experience allowed him to go beyond this intellectual awareness to feel it on a “visceral level (body, mind, spirit).” The session gave him the feeling that he could enjoy his life passions more fully if he could remember that the key to this enjoyment was not in the cognitive, or the emotional realm, but in his body, in the physical realm. He reported that he could listen to the Rodrigo piece to remind himself of this.

#### **Therapist’s summary of GIM session**

Before this session John expressed the need to deal with his stress and identified his concern about being too “driven” by the turmoil in his life. He was able to let go of his stress and his usually driven state very gradually during the music. He became completely present in the music, enjoying its aesthetics as it stimulated a passionate sensory/body, emotional, and archetypal experience. This ability to go beyond his usual intellectual turmoil driven approach to life seemed like a possible solution to help him manage his current life stress.

#### **5.2.3. Vertical analysis** (see appendix O for full interview transcript)

##### **How John *experienced* the music**

[During the first hearing of Rodrigo] he first experienced the beauty of the music as reaching out; the wisdom of history (“life goes on”), and felt the beauty of the music gently propelling him. He felt the tension in the music as something challenging or something gone wrong. He experienced the responsive solo guitar and orchestra passages as an individual expressing himself with the world responding. He felt the guitar passages as a dialogue between a slow, wise grandfather and his grandson. The music was a mystery (“what’s happening!” “What’s going to happen?”). An extended, strong orchestral statement brought a unity to the dialogues. This feeling of unity was passionate, excited, sad, and communicated a message: “Now is the moment!” The ending arpeggio was so delicate, like a bird flying out of his hand.

[During the second hearing of Rodrigo] he experienced the music as outside himself, initially, as something coming to him, or someone telling him a story. When he felt the timbre of the guitar, specifically the human touch on the strings, it became an individual insisting on expressing himself. He felt the orchestral passages as acknowledgements of the guitar’s expression. For a short time the guitar and oboe had a romantic dialogue, but then the low range of the guitar solo became a grandfather expressing his wisdom; the mid-range became a father; the upper range, a son. There was a “pleading” between the grandfather and grandson and then they all joined together. A strong orchestral interlude stated, “Life has all of this: pain, turmoil, and beauty.” In trying to comprehend and accept this complexity, he began “living in every tone; nothing else mattered.” This experience intensified into strong bodily sensations of “riding the music,” and as the music concluded he felt the final soft guitar arpeggio as “so sweet,” and felt jubilant, complete, and free.

### **How John *understands* the music experience**

John indicated the following aspects as significant in his music experience:

1. *The music as an external object turned into an internal experience.* Initially the music was someone outside himself telling a story. As soon as he felt the human touch on the strings of the guitar he identified with the guitar and then the music became an internal experience. John noted that he shifted from being “present as an ‘I’ listening to a piece of music which is outside of myself” to being an ‘I’ inside the piece having imagery of parental figures.
2. *Musical contrasts within the guitar solos and their resolution.*
  - There were contrasts between melody and harmony. The contrast between the melodic and strumming sections became different entities within the guitar, in dialogue.

- There were contrasts in tessitura. The contrast between the different ranges of the guitar became specific entities. In one hearing two entities were a romantic couple; in a later hearing three entities were a grandfather (low range), a father (middle range), and a son (high range). He felt especially compelled to really listen to the low pitched, slow paced guitar solos which communicated wisdom, understanding and assurance (“I know what you are going through;” let me tell you from my experience, “life is worth living”).
  - In each instance these contrasts were presented and, in the end, became integrated.
3. *Contrasts in instrumentation between solo guitar and orchestral passages.* “Sudden shifts in texture” between the guitar solo and orchestral passages created the feeling of a self with others (“an individual and the world”). The orchestral passages were statements from witnesses who responded to, or furthered aspects from the dialogues with comments such as: “We all agree.” “Now is the moment,” “Life is filled with turmoil, sadness and pain,” and “Life goes on.”
  4. *Musical language.* Rodrigo’s Spanish musical language was passionate and beautiful.
  5. *Harmony.* The harmony often contained minor chords within a predominantly major passage, and major chords within a predominantly minor passage. The blending of major and minor was very powerful in bringing strong emotions to the fore, and generally expressive of loneliness, vulnerability, and soothing. This blending felt related to emotions he had experienced in his life.
  6. *Timbre.* The guitar texture “feels emotionally expressive; like something that comes from inside, not outside of me.”
  7. *Melody.* The slow paced nature of the melody expressed a sense of freedom. The melodic material – its bends, turns, and suspensions – expressed yearning, reaching out, and saying, “there is something more.”
  8. *Repetition versus development of musical material.* Repetition of musical material in different instruments indicated agreement and listening to each other (“Yes, I understand you”); changes in musical material indicated different responses (“Now listen to how I feel,” or “But I have something else to say”).
  9. *Musical climax.* The climax of this piece’s development (which includes guitar and orchestral passages) was complex and strong which stimulated physical sensations. The simultaneous openness of mind, body, and spirit created the feeling of living in every tone (a

fully alive here and now experience). This was so enjoyable that he felt as if he was physically riding the music.

10. *Coda*. The conclusion of the piece, a simple quiet, arpeggiated guitar chord, resolving on a major third gave the feeling of satisfaction and having arrived at a destination.

### **How I understand John's music experience**

John's experiences in the music were related to various musical elements within the single piece used for his session, Rodrigo's *Concierto de Aranjuez, movement 2*. His music experiences can be briefly mapped as follows:

- Musical contrasts in tessitura, melody, and harmony within the guitar solos were perceived as three different entities in a dialogue.
- Sudden shifts in texture (between guitar solos and orchestra) became dialogues between an individual expressing himself and others, as responding witnesses.
- The Spanish musical language, especially the harmony, was experienced as passionate and related to feelings he had experienced in life.
- Repetition indicated agreement whereas development indicated "there is more to say."
- Melodic lines implied a sense of freedom and reaching out.
- Riding on the music during the peak intensity of the piece was experienced as living in every tone, a fully open and alive state in mind, body, and spirit.
- The surprising end of the movement was experienced as very satisfying.
- Experiencing the humanity of the guitar (the human touch on the strings) and its timbre transformed his music experience from being external to internal.

John's music experience can be divided into three episodes (see Table 5.7). In addition, the content of each episode can be understood within the psychological context that he brought into the session: his issue of being too driven and not fully present within himself. This was reflected in episode one, his initial experience of the music as outside himself, telling him a story. The guitar was an individual to which the orchestra responded. The guitar divided into different parts and the musical contrasts became dialogues. Agreements, disagreements, and passions were exchanged and subsequently the dialogues all merged into a feeling of unity that resulted in a final message at the end of the movement to seize the moment.

At the beginning of the second hearing of the Rodrigo movement, episode two, John's music experience shifted when he felt the humanity of the guitar. He became the guitar and his

relation to the music became internalized. With this shift, he began a deepened, more filled out version, of episode one. However, whereas the first episode was filled with different dialogues, in the second, the dialogue was more focused between a grandfather, father, and son. It also yielded a specific outcome – a strong message of assurance from the wise grandfather: You can accept turmoil as a beautiful part of life. The feeling of unity recurred when the grandfather merged with the father and son. In the third episode, he became fully activated in an experience of pleasure and passion in the music. Emotionally he felt pleasure, physically his senses were activated (he felt as if he was physically “riding the music”), and spiritually he felt that nothing else mattered more than living life to its fullest in each present moment (Whereas the first episode ended with a *message* to be more fully in the present, the second and third episodes culminated in a “now moment.”)

**Table 5.7: John music episodes**

Music	#	Music Episodes	Description of Episodes
Rodrigo x1	1	Music as external experience	Music experienced as beauty, tension, reaching out, wisdom of history Guitar was an individual Orchestra responded Guitar divided into dialogues Dialogues merged back into unity Orchestral peak - Message: “Now is the moment!”
Rodrigo x2	2	Music became an internal experience	Music felt human and He became the guitar He/guitar expressed himself Orchestra responded to him Guitar divided into dialogues Message of assurance
Rodrigo x2	3	Music became an intense multisensory experience	Dialogues merged back into unity Orchestral peak - Fully present in the here & now

To summarize, John’s music experience included a story that was reiterated in two hearings of one piece of music. In the first hearing the story was experienced in brief; in the second hearing, a shift occurred when the music became an internal experience. This can be likened to a story told too quickly to catch its details and its depth. With the second telling there is time to glean the true focus of the story, to digest its details, and to feel its emotional impact. Throughout the second iteration of the story, he became more engaged on all levels with a strong, heightened, and sensory oriented body experience that culminated at its peak intensity in

a fully “here and now” experience. These three music episodes transformed John’s consciousness from a state of being driven and not present to being fully alive in the here and now. Within the context of John’s presenting emotional issue, it can be seen that these three music episodes brought John an internalized realization that life’s turmoil is beautiful.

### **5.3. Nancy**

#### **5.3.1. Profile**

Nancy is a thirty-four year old female, is married, has one child, and at the time of this session was seven and one-half months pregnant. She has been a music therapist for twelve years, practicing mostly with adult populations, including forensic psychiatry, cancer, and hospice care. She recently completed her masters degree in music therapy. Currently she conducts approximately twenty music therapy sessions per week in two settings: a school with behaviorally and emotionally disturbed children and a hospice program. She is in GIM training, near completion.

Nancy plays flute and bass. Currently she plays both instruments in musicals, a jazz band, an orchestra, and shows or weddings. She has been taking flute lessons for the past year; reclaiming both her skills and her passion for performing. In addition, she plays and practices piano and guitar, learning new pieces on her own. When she was younger, Nancy's relationship with music as a listener was intensely personal and active; she often listened to songs which had specific associations and used them as containers for painful emotions. Recently she has been listening to music from her college years in order to reconnect to memories and feelings from her past. Nancy's relationship with music now is rich, yet it feels less intensely personal because she is less “needy” for solace. She feels that music is now more integrated, more a part of her, and more satisfying to her than it was in the past.

As part of her GIM training, Nancy has had thirty eight GIM sessions and twenty two sessions with peer trainees. She is not in ongoing GIM therapy and she has had no other experience in therapy. Her prior therapeutic work in GIM therapy examined how the upbringing by her family of origin impacted her childhood and how it continued to affect her life. Her core issue is an inability to let go of her parents’ introjected expectations of her which results in strong self-criticism. She lives with fears and self-doubt, and constantly second-guesses her decisions. Her goals in therapy include increased self-acceptance, self-forgiveness, and letting go of guilt feelings. In her GIM sessions, Nancy feels that she often has to “surrender” to the

music experience when it brings emotionally painful material to the surface. She says that she always leaves GIM sessions with increased awareness and having gotten what she needed from the music, although that is not always what she wanted. Her strongest music experience in GIM was when she expressed to her therapist that the music program the therapist had chosen for her was not adequate for her needs. When the therapist changed the music to play Holst *The Planets, Mars*, she had a strong emotional breakthrough due to the strength of the music.

Nancy's emotional issue was that she was simultaneously embarking on several life changes (leaving one of her jobs, ending GIM training, building a new practice, enrolling in a doctoral program) all during her second pregnancy. She was second-guessing her current life direction ("Do I know what I'm doing?"), she lacked confidence in her ability to manage so many changes in her life along with her family, and she was having difficulty managing fear, doubt, and self criticism in her daily life.

### **5.3.2. GIM session**

#### **Prelude**

Nancy discussed her fears and self-doubt in regard her pregnancy as well as in regard the other life changes she was experiencing. A one-week vacation had given her some time to relax, and this lessened some of her fears before this session. She was fearful about what the session would bring, but nonetheless she expressed excitement and motivation for it. She felt energized and focused from her week of vacation. Her presenting issue was to manage the fears and second guessing in her life.

#### **Initial music selection**

Seventeen pieces were initially selected: Borodin *Nocturne (string quartet)*; Bach *Little Fugue in G minor*; Bach *Christmas Oratorio (Shepherd's Song)*; Dvorak *Serenade for Strings, opus 22, movement 1*; Elgar *Enigma Variations #8, 9*; Faure *Requiem, In Paradisum*; Grieg *Cradle Song*; Holst *The Planets, Venus*; Mahler *Symphony #6, movement 3*; Mascagni *Cavalleria Rusticana, Regina coeli*; Mozart *Vesperae Solemnes, Laudate Dominum*; Mozart *Symphony #34, movement 2*; Ravel *Introduction and Allegro*; Shostakovich *String Quartet #3, allegretto*; Tchaikovsky *Symphony #4, movement 3*; Wagner *Siegfried Idyll*; and Wagner *Lohengrin Prelude*. These pieces reflect a very wide variety that included three choral pieces (by Faure, Mascagni, and Mozart), three pieces with a very strong rhythmic component (Ravel,



Shostakovich, and Tchaikovsky), and three pieces characterized by a structure that steadily and slowly crescendos to a climax (Bach, Elgar, and Wagner *Lohengrin Prelude*).

### Induction

The induction consisted of 1) a progressive relaxation for the body: “breathing in, opening to both feelings of calm and excitement, let them flow”; 2) a here and now focus: “opening to where you are now in this moment” and 3) a bridge to the music: “there will be something for you in the music today, so all you need to do is open. . . and really listen to the music.”

### Music program

The music program for the session consisted of: Wagner *Siegfried Idyll* and Mozart *Vesperae Solemnes, Laudate Dominum* repeated three times (see Table 5.8).

**Table 5.8: Nancy music program**

Piece	Times Heard	Duration	Total Duration
Wagner <i>Siegfried Idyll</i>	1	18:17	18:17
Mozart <i>Vesperae Solomnes, Laudate Dominum</i>	3	5:21	16:03
Total Music Program			34:20

### Verbal guiding interventions

Nancy’s verbal guiding interventions are listed in Table 5.9. Twenty seven verbal guiding interventions were used; 20 were music-centered.

**Table 5.9: Nancy guiding interventions**

Piece	Music-centered Interventions	Imagery-centered Interventions	Total Interventions
Wagner <i>Siegfried Idyll</i>	9	6	15
Mozart <i>Laudate Dominum</i>	3	0	3
Mozart—second hearing	6	1	7
Mozart—third hearing	2	0	2
Total	20	7	27

### Music imaging (see appendix J for full transcript of music imaging)

[During Wagner] she felt her body expanding and saw herself as a big doughy, solid (“Michelin Man”) self. She did not feel worried and, in fact, she had a sense of competence (“I

can do this”). She wanted more from the experience, to feel the expansion in her mind and emotions, but the music told her to be patient.

A tiny, delicate flower (the essence of her) formed, and was held inside the doughy self. She wanted more from this experience (for the flower to grow bigger), but again the music told her to be patient. Antennae formed, coming out of the back of her head. As they grew, they caused her to become strongly receptive: open and aware. All of her senses also became heightened to taking in stimuli. This was a complete reversal of her experience which had, until this point, been expressive, and not receptive. Then all of the stimuli strengthened the tiny flower (her essence) and it opened. She realized that the flower needed to become stronger, open, and ready. She also felt an excitement about living. She wanted more from this experience (for the flower to grow bigger), but the music, again, told her to be patient – the flower opened, but needed to go through a process to become ready before it could grow bigger.

Nancy felt relief when she realized how she and her whole family fit together as a unit. There was a special emphasis on the realization that her second child (about to be born) would not limit her life; rather that they would grow together. Then she lay down to rest.

[During first hearing of Mozart] she held her whole world in her arms. Feeling a sense of motherhood, she nurtured it, and herself, simultaneously. She felt confident, and felt a sense of relief and release when the music told her “You can do it all.”

[During the second hearing of Mozart] she felt reverence and awe; she felt blessed in regard her world and felt it growing. The voice came into the deepest, purest part of her (the flower/essence) and it drew out only the good things in her (confidence, competence, love) and left behind doubt, worry, and fear. Then it emanated out into the universe so that others could hear those good aspects of her, which was exactly what she wanted.

[During the third hearing of Mozart] she embraced the experience of clarity and felt “This is where I need to be right now.” She accepted where she was, and accepted her pace. She felt perfectly confident in the support of others and said thank you to them.

### **Briefer summary of music imaging**

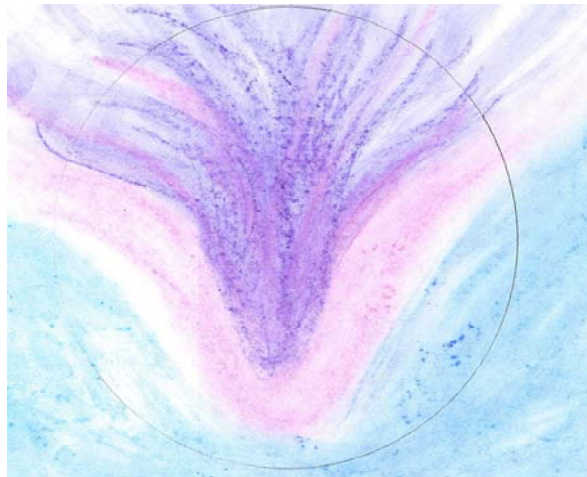
The big doughy self, the tiny flower, the antennae, and the choral voices (respectively: her competence, her essential core, her awareness, and her outside support system) all grew gradually stronger. Then she nurtured herself and her whole world with outside support which

gave her clarity and confidence in herself. In the end it allowed her to accept, even embrace, herself as she was.

### **Return/postlude**

Nancy drew a mandala (see Figure 5.3) a thickly drawn pink “V” in the center, its top filled in with light purple; the lower parts of the page under the “V” and to the sides of it were filled in with light blue. She indicated that it was reflective of her experience during the Mozart *Laudate Dominum* saying, “the blue is the support of all the voices surrounding me; the pink is me/my voice, and it weaves into the purple; the purple is my voice coming out of me . . . These are definitely my colors, but my previous drawings go downward, not upward. I love it.” She titled it, “The ME I want to be – always.”

Figure 5.3: Nancy mandala  
The ME I want to be always



The session brought Nancy feelings of 1) inner confidence - her “good and pure” essence; 2) reassurance that in the end she would be fine with her life decisions even if they did not all succeed, 3) relief that her family would grow with her, not limit her, and 4) gratitude for living and excitement to keep growing.

### **Therapist’s summary of GIM session**

Whereas Nancy entered the session with anxiety, fear, and impatience about her life, she left with an acceptance of her current stage of growth: more identified with her essential positive

core (a tiny, but strong, flower), renewed confidence in herself (that she is always growing, even if it feels like her life is moving very slowly), a different feeling of connection with her family (that the family unit fits together and they are growing together), and a new gratitude and excitement for life.

### **5.3.3. Vertical analysis** (see appendix P for full interview transcript)

#### **How Nancy *experienced* the music**

[During Wagner] she felt the music developing, and then resolving; it was lush and beautiful. She also felt the slow pace of the music. This told her to be patient, not to rush her process. Next, the music became unsettled and unstable and sounded like something new was taking shape. She sensed that something good was coming in the music. Subsequently, the music grew more and more solid. As the music developed she felt a complete reversal of her experience with it. Instead of an expressive stance, she held one of heightened receptivity of all her senses. As the music developed, she realized that there is always more coming in it, and it is always better than what came before it. In addition, she sensed that something good always comes of the unstable parts of the music. All parts of the music fit together. At the conclusion, the music was under her – rocking, soothing, and calming her, so she lay down on it to rest.

[During the first hearing of Mozart] the solo voice was a surprise. At first it was so beautiful that she felt, “That couldn’t be me; who is it?” But she then realized it *was* her and she fully experienced herself as the singer, singing beautifully with a clear and rich tone, doing a good job. The chorus entrance was also a surprise, and initially she felt it intruded on her and she lost the connection with her own voice. But as she listened to the chorus, she reassessed the situation and felt the chorus supporting her. She heard them say, “You can do it all.” She experienced the piece as having three layers: a slow bass, mid-range arpeggios, and a beautiful, smooth melody. As a whole it was three beautifully structured layers that each had a different pace, but that all went together. She did not hear any orchestration; she was completely focused on the voices.

[During the second hearing of Mozart], when the solo voice came in, instead of singing, her experience was reversed: she was taking the music in receptively. The solo voice went deep into her essence and she felt it drew out all of the good things in her and left behind all her doubts and fears. The voice came out even stronger than when it entered since all the good things (the “true me”) were being expressed by the sounds of the voice. Her singing was heard

by others as it was: from her pure, good, core self. She was very aware of receiving the music and that it came from outside her, and she felt she was connecting upward.

[Mozart, third hearing] She wanted to hear the piece again and this time she focused even more specifically and deeply on the motion, color, and clarity of the solo voice timbre. She experienced the chorus as people supporting her through their singing and felt perfect confidence in them. She felt them move from behind her to underneath her; this deepened the connection with them. At the end, as the solo voice, she felt she was singing with the chorus, thanking them.

### **How Nancy *understands* the music experience**

[During Wagner] She heard the musical material developing, so she also felt that there was room for her to grow. This created the expansion in her body. She had confidence in the music because she knew it would always resolve. She felt the music's forward movement but it was very slow. Hearing the music's slow pace made her realize that even slow movement forward is still movement forward. That told her to be patient with herself when her life is moving very slowly. Changes in the music, especially trills and ornaments, caused the flower (something tiny) to take shape. Again, the music's slow pace told her to accept the slow pace of her life. New timbres (woodwinds) were introduced which brought a completely new sensation of taking in instead of expressing outward. The music had developed so far away from its original statement of the melody that she felt "there must be a reason" which made her feel that something new was coming. She felt it would be something good because she had confidence in the music. Each repeated statement of the original (familiar) melody was more accented and stronger in every repetition, which made it feel more solid. This was reflected in the flower feeling stronger and becoming more solid. Finally she knew the end of the music was coming because she heard things tying up and resolving. The melody was joyful, not too solid, but holding, and "doing it's own thing" which she felt as "me." Besides this, there was a solid bass, and all the other parts of the music fit so well together. She felt the music rocking her like a lullaby which calmed her.

[During the first hearing of Mozart] she heard the singer singing with love and tenderness which she felt originated in the dynamics, expression, and also in the deep breaths (inhalations) that could be heard on the recording. The entrances of 1) the solo voice, 2) the chorus, and 3) the re-entering solo felt surprising and kept her moving forward which was very important. These three elements clearly represented: 1) her, 2) a group supporting her, and 3) an integrated

experience of herself with group support. Initially, when the chorus entered, she lost her connection with her own voice, but when she listened to them she heard the support they expressed and accepted it.

[During the second hearing of Mozart] she heard the piece more deeply. This time it came from outside her. Because she knew what was coming (it was predictable) she could go deeper. She could “take it in more,” and this increased her confidence in the music and herself. The clarity of timbre in the solo voice brought her attention to her own clarity about her world. Her attention was completely on the voice, not on the instruments. She did not understand the words<sup>1</sup> so she could project her own meaning onto the music. She wanted to connect to the voice even more strongly which created the desire to hear the piece again.

[During the third hearing of Mozart] the delivery of the solo was experienced as completely confident, tender, loving, beautiful, and sure. She felt that it imitated life perfectly (“you can take your life experiences and relate it to something in the music”). The (IV-I) amen cadence caused the feeling of gratitude towards the supportive chorus, and the feeling of being done.

In both pieces of music she felt 1) confidence and trust in the structure of the music, 2) a shift from expression to reception, and 3) a constant moving forward. To her, the forward motion of both pieces was the most important aspect. During the Wagner, she felt the forward motion was located in the slow, gradual development of the musical material (“the melody keeps coming back, developed more each time”). During the Mozart, she felt the forward motion was located in the surprise each time the voices entered (“the voices entering provided constant movement forward”). She felt that the music brought out the internal experiences; the repetition brought depth to them.

### **How I understand Nancy’s music experience**

Nancy’s experiences in the music can be seen primarily as a simultaneous and parallel music/psychological process. This process can be seen initially in the juxtaposition of her

---

<sup>1</sup> Psalm 117 – with English translation: SOLO: Laudate Dominum omnes gentes, Praise the Lord, all ye nations(peoples), laudate eum omnes populi. praise him, all ye peoples. Quoniam confirmata est. For his loving kindness (mercy) super nos misericordia ejus, has been bestowed upon us, et veritas Domini manet, and the truth of the Lord endures in aeternum. for eternity. CHORUS: Gloria patri et filio Glory to the Father, Son, et spiritui sancto, and to the Holy Spirit; sicut erat in principio as it was in the beginning, et nunc et semper is now, and ever shall be, et in saecula saeculorum. world without end. Amen. Amen.

accepting attitude towards the music program and her critical attitude towards herself. Her internal state was characterized by a rejection of the slowed down state of pregnancy and her professional life, and her music experience began with an undercurrent of criticism towards her images as developing too slowly. But when she experienced the music as having the same attribute that she had (developing slowly), she did not reject this attribute in the music, and in fact she experienced the music's slow development as aesthetically beautiful and fully accepted it. Her music experience proceeded in this way: what she rejected in herself because it was unacceptable to her was experienced as beautiful in the music, accepted as beautiful, re-introjected back into her internal world, and felt as a positive resource. This constitutes a parallel psychological and aesthetic process that occurred with several attributes and can be seen in the description of the music episodes below (see Table 5.10).

In the Wagner *Siegfried Idyll*, she began with an experience of the music as growing slowly, and felt that there was enough space in the music to grow. Simultaneous with the growth of the music, her body expanded. During this experience, the music was felt as completely trustworthy because it always resolved, allowing her to experience utter confidence in it. At the same time she felt a growing sense of confidence in herself.

In the next several music episodes that constituted the main part of her experience, she experienced Wagner's overlapping development (the musical and especially the melodic material) as growing and solidifying very gradually throughout the piece. Nancy's parallel psychological process was expressed as a gradually strengthening flower that had begun as tiny and fragile and grew stronger and stronger, all the while introjecting the aesthetic qualities of the music.

Throughout these music episodes, there was an underlying self-criticism and this was verbalized at three points in her session. For example, despite the fact that the tiny flower was growing slowly and steadily stronger, she wanted it to grow quickly. She was also critical that it was only growing stronger, not bigger. At these times, Nancy noticed how slowly the music was developing and each time she felt its slow pace, the music gave her a message: slow down, don't push, don't rush, you are OK; and so she slowed down with it. This was a key to Nancy's music experience in the *Siegfried Idyll*. She felt very negative and impatient about her own slow pace, yet when she heard the music's slowly developing pace, she experienced it as aesthetically beautiful and trusted it. Once she experienced slowness as an aesthetic process, she could then

accept it in herself. In other words, she transferred the aesthetic process and its qualities into its parallel psychological process (or introjected it as a psychological process).

The second key for Nancy within this piece was a reversal in how she experienced the music in episode four. Whereas initially she felt the music *expressively* and she felt *active in her response* to it (growing, changing); once the psychological/musical development of the tiny flower/core began, she began to experience heightened sensory feelings of *taking in* the music through her ears, all of her senses, and her body. This heightened sensory, *receptive* experience began in the form of an image of antennae growing from her neck.

In the last episode of the Wagner, she experienced the music as having disparate parts, mainly the melody and the many orchestra parts underneath it. With this aesthetic experience she had an analogous psychological insight: that the disparate parts of her life that were felt to be at odds with each other (family life, professional life, inner life), could all fit together as well as Wagner's musical elements.

In episode seven, during the Mozart *Laudate Dominum* from *Vesperae Solemnnes*, Nancy experienced herself as the vocal soloist, singing confidently with the chorus supporting her. There was an immediate introjection of the feelings of confidence and support. In the second hearing of the piece, she had another reversal in how she experienced the voice (episode eight). Whereas in the first hearing she had become the singer, singing the vocal line, in the second hearing she switched to a receptive stance and experienced the vocal line as coming into her. Specifically, the clear timbre of the voice came into the deepest part of her (the image of the flower) and drew out her "true" self – her positive core – while leaving behind her self-criticism and self-doubts. She felt this to be a profound spiritual experience (episode nine). And in the final hearing of the piece, episode ten, the focus was on the intensification of support from the chorus towards her, her introjection of the spiritual feelings of reverence, gratitude, and connection.



**Table 5.10: Nancy music episodes**

Music	#	Music Episode	Parallel Psychological Episode
Wagner	1	Developing, room to grow Trustworthy because it always resolved; felt confidence in it	Body grew as music grew Introjected confidence
	2	Said to her: “slow down, don’t rush” She heard the music as slow and beautiful	Accepted and introjected this attitude towards her own slow pace
	3	Development sections: music became unstable, something good always follows	Contact w/tiny essence (core) and antennae developed
	4	Shift (reversal) from expressive to receptive: strong sensory experience	
	5	Grew more and more solid	Tiny core grew stronger
	6	Disparate parts that fit together	Introjected the feeling that disparate parts of her life could fit together
Mozart	7	It was her singing with confidence, tenderness in the tone of the voice Chorus supports her “You can do it all”	Introjected confidence  Increased confidence
	8	Shift (reversal) from expressive to receptive: strong spiritual experience	
	9	Clarity/voice into her core; drew out the “true” me (positive core)	Introjected clarity into body
	10	Chorus lifted and held her up	Introjected spiritual feelings (connection, reverence, gratitude), feeling of perfect confidence

To summarize: Nancy’s process with music can also be contextualized within the emotional issues she brought to this session. She entered the session in a rather stuck emotional state of self-doubt, low confidence, and critical self-judgment, feeling that the different aspects of her life were at odds with each other. The session revealed that her symptoms were related to the slowed down pace of her life, especially due to her pregnant state. Therefore, the keys to her psychological transformation were the experience of a beautifully aesthetic process that was always gradually moving slowly forward, and her ability to experience this analogously in relation to herself throughout the entire music experience. Simultaneously, Nancy was introjecting aesthetic properties of the music: clarity (timbre), confidence (dependable development), and disparate parts that develop simultaneously (layered development).

In conclusion, Nancy’s music experience was characterized by 1) gradually developing episodes in which she transferred, or introjected, specific aesthetic properties of the music to an analogous psychological process, through 2) two reversals of the music relation from expressive to receptive; one was sensory, one was spiritual, which 3) transformed her from a state of self-criticism, self-doubt, and feelings of incompetence to a state of spiritual connectedness,

confidence and clarity. Her confidence and trust in the music combined with her experience of the enjoyment of its aesthetic beauty was key.

## **5.4 Deval**

### **5.4.1. Profile**

Deval is a fifty nine year old male. His main position has been as a college professor for twenty three years, teaching music fundamentals, theory/composition, conducting orchestras/choirs, history and practice of twentieth century music. He is currently planning his retirement from teaching and is studying music therapy. Deval has had some clinical experience with children with developmental disabilities and an in-depth experience with an elderly client (his preferred clientele) with whom he uses improvisation, dreamwork, and music listening. He says he uses “everything in my background” in his music therapy clinical work.

Deval was a business manager when a transformative music experience at a concert of the Tchaikovsky *Piano Trio* changed his career path to music. He became a composer, organist, choir conductor, and a freelance violinist/violist. Deval relates to music as a composer and as a performer; he improvises and listens to music. When he listens to music it is often with a very vivid imagination; he has very rich, full visual images and feelings. He is a very active musician with a large repertoire of music in many genres, and his life revolves around music. He said, “Music is the substance of my life; it *is* it, not a part of it. I can’t separate it out from anything else.”

Deval has had two recent peer-led GIM sessions. He was in weekly Freudian analysis for seven years due to a professional trauma and currently he is taking Gestalt-informed music therapy sessions. Approximately six years ago he suffered, and resolved, a moderate two year depression due to a friend’s death. The focus of his psychotherapy has been on relationships, career issues, and his creative life. His core issues include repressed anger, deferred mourning, and addressing unmet emotional needs due to the death of his father when he was fourteen years old, and his mother’s death twenty six years ago. This has manifested itself in his current life as a constant search for external approval and a preoccupation with self-criticism and perfectionism.

Deval’s current life issue is his impending retirement from teaching which is all-encompassing since his relationship with music is so central to his life. The therapy session

occurred on the anniversary of his mother's death (twenty six years ago), so these were his presenting issues.

#### **5.4.2. GIM session**

##### **Prelude**

Deval discussed several emotional issues: he related his dream from the previous night, focused on the fact that it was the anniversary of his mother's death which also reminded him of his friend's death, and feelings of sadness and abandonment in regard his imminent retirement from teaching. He was looking forward to the session and felt curious about it.

##### **Initial music selection**

Fourteen pieces were initially selected: Bach *Come Sweet Death*; Bach (orchestrated) *Prelude in Eb minor*; Boccherini *Cello Concerto in B, movement 2*; Borodin *Nocturne (string quartet)*; Canteloube *Songs of the Auvergne, Brezairola*; Debussy *String Quartet, movement 2*; Elgar *Enigma Variations #8-9*; Grieg *Cradle Song*; Massenet *Scenes Alsaciennes, Sous les Tilleuls*; Mozart *Symphony #34, movement 2*; Mascagni *Cavalleria Rusticana, Regina Coeli*; Vaughan Williams *Rhosymedre, Prelude*; Wagner *Overture to Lohengrin*; Webern *Langsamer Satz*.

##### **Induction**

The induction consisted of 1) a progressive relaxation for the body using the breath to open and let go inside; 2) a here and now focus: "imagine a colored mist around, " 3) a bridge to the music: "your work for today is to really listen to the music. . . .let yourself feel curious for how the music will sound. . . there will be something in the music for you today... you can let go and really open to the music."

##### **Music program**

The music program for the session consisted of: Bach (orchestrated) *Prelude in Eb minor*; Beethoven *Violin Concerto, movement 2* played twice; Mascagni *Cavalleria Rusticana, Regina Coeli*; and Canteloube *Songs of the Auvergne, Brezairola* played three times (see Table 5.11).

**Table 5.11: Deval music program**

Piece	Times Heard	Duration	Total Duration
Bach <i>Prelude in Eb minor</i>	1	5:13	5:13
Beethoven <i>Violin Concerto, mvt 2</i>	2	11:07	22:14
Mascagni <i>Cavalleria Rusticana, Regina Coeli</i>	1	6:20	6:20
Canteloube <i>Songs of the Auvergne, Brezairola</i>	3	3:38	10:54
Total			44:41

**Verbal guiding interventions**

Deval's verbal guiding interventions are listed in Table 5.12. Twenty nine verbal guiding interventions were used; 22 were music-centered.

**Table 5.12: Deval guiding interventions**

Piece	Music-centered Interventions	Imagery-centered Interventions	Total Interventions
Bach <i>Prelude in Eb minor</i>	3	1	4
Beethoven <i>Violin Concerto ( 2)</i>	4	4	8
Beethoven—second hearing	3	2	5
Mascagni <i>Cavalleria rusticana, Regina Coeli</i>	5	0	5
Canteloube <i>Songs of the Auvergne, Brezairola</i>	2	0	2
Canteloube—second hearing	3	0	3
Canteloube—third hearing	2	0	2
Total	22	7	29

**Music imaging** (see appendix K for full transcript of music imaging)

[During Bach] he began in a large, open meadow which turned more forest-like and then he moved upward into space. In the distance he saw a flash of light – someone moving in gold lamé clothing and felt he should not go there; near him he sensed some beings. Overall there was a feeling of openness, of being in space over the meadow.

[During the first hearing of Beethoven] he felt awestruck as the beings turned into wings that held him on all sides and carried him through the air. The space turned misty, and then became vaster so he could see forever. The feeling of being small and carried higher and higher by wings was almost overwhelming. He was so moved because he felt completely held and safe from falling, yet free at the same time. Overall, it was a profound feeling of support. Then he

realized he was being taken towards a celestial dome to meet a great being. He was given a beautiful cloak and became very thin, like a thread. He went through a door and things changed: he grew a bit bigger; the light around him turned into softer colors (apricot, gold, and pink) and receded as it darkened into night and a path appeared. Overall, there was a feeling of openness as he moved towards his destination.

[During the second hearing of Beethoven], still moving higher, he saw his actual destination: a strange tower that appeared like some kind of baker's creation made of mist and light. He was being beckoned to it by beings, and everyone was joined in agreement that he should enter the structure. He began to walk on the path, and then he became the path which moved towards the tower. He was tearful when he felt completely welcomed there, but realized "I should have come a long time ago" but he had not been ready. He went into the tower, a vast room with a dome ceiling which opened up to reveal a vaster sky. There, he was very tearful and felt very close to everyone who had died. Still moving in a procession with the beings, he was moved gently up a set of stairs to a throne where it seemed he should sit. The room was filled with lights, color, and beings, and he felt threads of connection being spun through everyone there. The prevalent feeling was of the non-verbal sense of connection and agreement, "Yes, do this!"

[During Mascagni] the image shifted: the stairs turned into a ramp, the beings turned into people and increased in number, and the feeling of being drawn into something grew stronger. Initially the colors in the throne room were strong reds and gold which cooled down to silver and purple, and finally it appeared that he was being drawn, not to a throne, but into a big eye. He went into the eye and, shockingly, past it – into the vastness of space. The beings were still accompanying him and he felt he was as vast as the space he was in. The overall feeling was the gradual ascent into this vast open space that was very spiritual with very strongly expressed emotions.

[During the first hearing of Canteloube] a being joined him at his side and he glided, floated, flew, rocked with it – all with a feeling of lightness, safety and not wanting to stop. He experienced the voice as liquid silver pouring into his heart.

[During the second hearing of Canteloube] he landed, felt himself still and lying down, and rooted in his center. His head opened like a tube and the silver liquid flowed through his

body so that he felt like a conduit. The liquid was comforting; it cleaned and dissolved all the cobwebs inside him.

[During the third hearing of Canteloube] the silver liquid continued to clean him. Wherever it touched was instantly dissolved and healed.

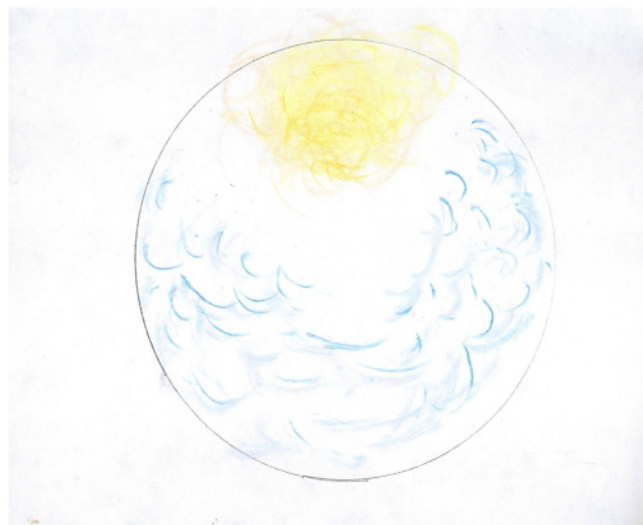
### **Briefer summary of music imaging**

Deval became very small and journeyed with spiritual beings who guided him in a very gradual ascension into vast open space. This journey began in a meadow and progressed into a regal, domed structure through lights, mists, colors. As he grew bigger and more drawn into the experience, the feelings of support and connection intensified, and finally it reached a spiritual peak when he was drawn through a big eye into open space. A key emotional aspect of the journey was when Deval realized that he should have traveled there long ago but had been unready. After his journey, a spiritual being helped him land, and his body, especially his heart, was cleansed and healed by a silver liquid.

### **Return/postlude**

Deval drew a mandala (see Figure 5.4) around the bottom two thirds of the circle, lightly drawn light blue clouds encircle a golden yellow circular light drawn at the top of the circle with an inch of white space in between the blue clouds and the light. He titled the drawing, “Supported; on the path; towards the light” indicating three separate parts of his experience.

Figure 5.4: Deval mandala  
Supported; on the path; towards the light



Deval's journey gave him the perspective that he could connect with what is good in him, with his internal resources, and that these resources can not only satisfy him, but beyond – they were something to celebrate. Even further, the experience suggested that he could be more open and more alive, and reminded him that even when he feels alone, that he is not: there is always a deep spiritual support and that it can feel constant and gentle. He was impressed that there was a place within him where everything could "proceed in a beautiful tempo, with so much support, towards a goal," a mode of being that was so open, directional, and not in a hurry: fully living. Deval's session portrayed his journey from his youth to adulthood to meet his full potential.

### **Therapist's summary of GIM session**

This session occurred on the anniversary of Deval's mother's death and addressed the issue of the death of his mother and father. A deeply felt spiritual journey that connected him with all those (including his parents) who had died impacted him spiritually and psychologically, and provided him with an alternate, more spiritual, approach to this period of his life. Whereas he had been seeking external solutions to his emergent feelings of anxiety and loneliness in regard his retirement from teaching and the transition to his new music therapy career, the session suggested he seek his internal spiritual resources for help. He summarized his session saying, "I have been disconnected from the reliable things in me. . . [this] brings me back to a sense of myself that I really needed, especially in regard changing careers." In addition, the session helped him gain a deeper perspective regarding his tendency to seek external approval – he was insightful about how his constant search for approval from others was related to his unmet emotional needs due to the death of his father.

### **5.4.3. Vertical analysis** (see appendix Q for full interview transcript)

#### **How Deval *experienced* the music**

[In Bach] He felt he knew every note of this piece so well. He knew the piece was in Eb minor and was surprised that he experienced it as full and very bright, despite the fact that he feels it is usually a dark key.

He mentioned being especially aware of several elements of the piece: the high tessitura and color of the solo violin, the overall slow tempo and the rubati, when the melody was taken into the lower register, and the harp strokes.

[During the first hearing of Beethoven] he did not recognize the piece at first, then immediately he felt, "This is very ancient music; it comes to me as if from billions of years ago"

and it felt holy, sustaining, and healing. Several aspects of his prior relationship with this piece affected his music experience. 1) He had actually used this piece for solace, as a boy, when he felt the weight of responsibility caring for his dying grandfather. In this regard, he felt as if he was a little boy who needed to listen to it when his grandfather was sick. 2) He related to the piece as a violin soloist, and 3) in general, he knew every note of the piece so well that he felt he could “ride it.” In fact, near the end of the movement he was anticipating the (strong) transition to the third movement and when it did not come, he had the following thoughts: 1) that I was not going to play it, 2) thankful to not have to deal with the strong third movement, and 3) finally he wondered “Now what?” Despite his pre-existing relationship with this piece, he reported permitting himself to be moved spontaneously by it, saying he was “quite far from my usual cognitive framework.”

He especially experienced the following elements in the music: the simple structure, the soft dynamic, thin texture, the high register of the violin, breath in the music, the big surprise chord as a roar underneath him, the way the orchestra supports while the violin moves freely in and out, the “business” end of the piece with a subsequent very slow ending.

[During the second hearing of Beethoven] he was completely unaware that the movement had been repeated. He felt it was familiar, but experienced it as different music from the first hearing. In general, he experienced the second hearing as warmer, fuller, and faster; not at all like the first hearing. (In fact, he believed that I had skipped the strong transition to the third movement, and thought that he was listening to an excerpt from the third movement. After the session when he learned that I had actually repeated the second movement, not played part of the third, he was shocked that he had not recognized this because of his intimate, cognitive musical knowledge of this piece. However, he was pleased with this altered perception because his teaching involves perceptions in music listening.)

He especially experienced the following elements of the music: its gentle stepwise motion, the violin texture’s sparseness, but with a rich, blood red, full timbre, and the interaction of the held chords by the winds with the violin connecting the scale steps in between. He experienced the second hearing as very loving, and feeling like a “connection.”

[During Mascagni] he was not familiar with the piece, and felt jarred by the change in musical language, beginning with the organ. He felt shock and confusion at hearing the opening organ notes; he experienced them as architecture, like a church. When the voices entered, both



the shock and the church image faded away and left only colors: vibrant red, orange, and gold. In addition, he experienced the “flesh and blood” of the singers. He understood the Latin/Italian text <sup>2</sup> and heard it to be a request for help by the soloist. He felt the ending as a huge “Amen.”

[During the first hearing of Canteloube] the piece sounded like a lullaby<sup>3</sup> and also like a simple jewel. The piece was familiar to him, but not known. Because he did not know the piece, he had some initial worry in the midsection that the music would change, but then relaxed. Throughout, his attention was focused primarily on the voice, not the orchestra.

[During the second hearing of Canteloube] he recognized that the same piece was being repeated. The repetition felt very good, like being put on hold for a moment during a phone call, then the caller returning (“Ah, it’s all still there.”) The timbre of the voice was very pleasurable and comforting.

[During the third hearing of Canteloube] he felt the repetition as a pleasurable reward because he felt like the work of the session was done after the second hearing, so it was a pleasure to get to hear it again. This time through, it helped him to “land” even more. He heard the music more clearly and consciously, with heightened awareness. He was especially aware of the melody in his upper body and the bass notes in the parts of his body connected to the mat underneath him.

### **How Deval *understands* the music experience**

[During Bach] the violin color and its high tessitura brought the brightness of the meadow and the light. The slow tempo and rubati gave a feeling of openness and space. The harp strokes felt like the little bits of light (gold lamé). When the melody was in the bass it brought the warm, luscious dark green color of the forest.

[During the first hearing of Beethoven] the feeling of sacredness came from the hymn-like, simple, homophonic structure. Initially, he experienced the soft dynamic, thin texture, and high register of the violin solo as having a clean and far away feeling, implying ascent.

---

<sup>2</sup> Rejoice! Oh Queen of heaven because He whom thou was found worthy to bear has risen from the dead as He said he would. Alleluia! Let us give praise, our Lord is not dead. Shining in glory He has opened the tomb. Let us give praise to the risen Lord, ascended this day to the glory of Heaven. Regina Coeli laetare: Alleluia! Quia, quem meruisti portare: Alleluia! Resurrexit sicut dixit. Alleluia~ Inneggiamo, il Signor non e` morto! Ei fulgente ha dischiuso l’avel. Inneggiamo al Signor risorto, oggi asceso all Gloria del ciel.

<sup>3</sup> The song is a lullaby with the following words in French: Come come sleep, descend upon these eyes. Come from wherever you will! Sleep will not come, the laggard!. The baby will not sleep! Sleep, come, hurry up. . . It is coming at last, the laggard! It is coming, here it is! And the baby is going to sleep... Ah!

Throughout the piece he experienced the violin solos as beginning in a high tessitura and then moving, through twists and turns, continuously higher like his imagery. He also associated his becoming small and thin with the thin E string of the violin which is where much of the solo playing takes place. The “breath” in the music said to him, “What I have to tell you, I have to tell you slowly and carefully because it’s awesome” – this contributed to his feeling of awe. The violin solo swooping in and out of the orchestral support was experienced as the feeling of being firmly held on all sides but still being free. This feeling grew stronger until he felt almost overwhelmed during the section with big surprise chords (beginning at 3:40). Perhaps the violin breaking out into sixteenth notes while the orchestra gets richer and fuller underneath was what darkened the light into evening. After its “business” end, the piece spins out with very slow energy which he felt was like rising up and looking back over something. This probably gave the feeling that he was way above something. Also, after the business end, when the piece continues with many sequences going up and up, he experienced them as ascension and as vast space.

[During the second hearing of Beethoven], the rehearing brought the feeling “Where have you been? What took you so long?” The gentle stepwise motion of the piece had the feeling of a procession and, during the second hearing the violin timbre was rich, full, and blood red like the regal room with the throne. The held wind chords with the violin connecting the scale steps in between them were experienced as a feeling of connection and he felt each note to have its own emotional load.

[During Mascagni], when he heard the organ, it was experienced as bright colors (reds), but subsequently cooler chords (B minor) brought cooler colors. When he heard the chorus the beings in his imagery changed into actual people. In general, he felt that he clearly heard each of the three main elements of his image in the different parts of this piece: he identified the soloist as himself, asking for help; he identified the orchestra and chorus as the people supporting him; and he identified the gradual ascension of the music as the procession ascending upward. In fact, because these elements fit his imagery so well, he wondered if I had chosen the music with these exact three elements in mind saying, “The words blended so well; upward motion, offering . . . big operatic singing to the Queen of Heaven, ‘we all kneel before you’ so it went perfectly with what was happening, and it was dramatic.”

[During the first hearing of Canteloube] he felt the continuity in the musical language between the previous piece by Mascagni and this piece – he felt they were both simple. He felt Canteloube’s language as comfortable, especially the viola (which he plays) and experienced the music as delightful, tender, and sweet. He experienced safety in the orchestral accompaniment, although his focus was primarily on the voice.

[During the second hearing of Canteloube] the reedy timbre of the voice was experienced as liquid silver. The deep bass drone brought the feeling of lying down, of landing and when he landed he realized that the session was ending.

[During the third hearing of Canteloube] he felt that each hearing was a different kind of “coming back”: coming back into his body, coming back from space, and coming back into a different mode of action.

After the session/interview, Deval purchased, and continued to listen to, the pieces from the session and felt a desire to return to his “old listening” repertoire. This felt like “going home” to him. He felt that this session gave him a direct encounter, a physical knowledge of music’s power to open perception and facilitate transformation about perception.

### **A briefer summary of Deval’s understanding**

Tessitura, dynamics, and other specific elements sparked specific images (colors, etc); each piece conveyed something(s) to him. Initially, the Beethoven was sacred and ancient because of his prior use of it and he responded to its elements with many images and feelings. In the end, the way the violin and orchestral parts interacted became the key element: a connection that was strongly spiritual. The Mascagni was a kind of literal acting out of the already established scene: he and others ascending. The reedy vocal quality was like flowing silver liquid. He understood the repetitions as hearing music afresh each time, or at least from a different perspective. The music felt like his music, like “home.”

### **How I understand Deval’s music experience**

Deval’s music experience must be seen initially within the context of his specific association to the Beethoven *Violin Concerto, second movement*. Unbeknownst to me, this piece held special significance for him because he had listened to it as a child on a daily basis when he was caring for his grandfather near to death. As soon as he heard the piece, he felt it as “sacred” and “ancient,” and in the interview he expressed feeling like a little boy needing help through much of his journey. Although Deval related to this piece afresh (he did not verbalize any

memories during the GIM session), his intimate emotional relationship with this Beethoven movement obviously impacted how he experienced this music program. In addition, it should be mentioned that he had also played this concerto as a soloist when he was an adult. Deval's music episodes are outlined in Table 5.13.

In the first music episode, Deval experienced the Bach *Prelude in Eb minor* as bright, open, and spacious. He “knew every note” of this piece and felt completely at home in it. He began his journey when he experienced the music lifting him out of a bright meadow into open space. When the Beethoven *Violin Concerto, second movement* began, he experienced it as sacred, ancient, and he had a sense that it had something to tell him, “What I have to tell you, I have to tell you slowly and carefully because it’s awesome.” He experienced the solo violin as very high and thinly textured (mainly playing on the high E string), and the orchestra as supportive. His image of being carried in the air, held on all sides by spiritual beings was accompanied by a strong feeling of perfect balance between being firmly held, yet completely free, and this felt “awesome” to him. The strongest feeling was of being carried, completely supported towards a destination. In general, the second hearing of the Beethoven, the third music episode, intensified his sense of moving towards an unknown destination, and strengthened the feelings of safety, freedom and support. The second hearing introduced several new elements into his journey. Despite the feeling of support he had, he had not experienced a feeling of connection with the spiritual beings that were carrying him. For the first time, during the second hearing, he experienced a feeling of connection: musically between the soloist and orchestra, and emotionally between himself and the spiritual beings supporting him. In addition, this second hearing brought about a strong, negative, emotional reaction – feelings of regret and self-criticism – when his destination (a throne) at which he felt he should have arrived earlier in his life, appeared. However, this reaction was short-lived and was followed by a spiritual experience in which he felt the presence of all the deceased individuals he had known, with a feeling of strong connection to them. When the Mascagni *Regina Coeli* from *Cavalleria Rusticana* began, he experienced the change in musical language and instrumentation (organ, chorus) as jarring. This caused several shifts in his imagery: his image changed to be more literally church-like, the spiritual beings changed into people, and his destination – the throne – changed into a gigantic eye. Despite these changes in imagery, each element of his journey not only stayed the same, but was reinforced. In other words the new musical language fit into his

already established journey and intensified it, rather than changing it. In fact, despite the initial shock he felt at the change in musical language, he experienced the *Regina Coeli* as corresponding so perfectly to his journey that it surprised him. He felt the music corresponded to his images as follows: he became the soloist (despite the fact that it was a female voice) asking for help; the chorus and orchestra became supportive human beings; and the repetitively ascending sequences continued the ascension into space. By the end of this piece he had ascended through the “eye” and arrived at a spiritual peak experience in vast outer space. The Canteloube *Brezairola* from *Songs of the Auvergne* brought a feeling of light and safety when he heard it as a tender lullaby, and he experienced one spiritual being at his side, helping him to descend back to earth. He heard the voice as having a reedy quality and imagined it flowing into his heart as a silver liquid. The second hearing of the Canteloube expanded the feeling of the music/liquid flowing, and it flowed beyond his heart into and throughout his whole body. It did not fill his body, but rather it dissolved the “negativity” and completely cleaned it out. After this, he landed. To summarize Deval’s psychological process with the music, he had a gradual series of episodes of a strengthening connection with his own inner spirituality and one episode of an emotional confrontation (with regret, sadness and death) that led him first to a spiritual peak, and then to a sensory/body “here and now” experience.

**Table 5.13: Deval music episodes**

<b>Music</b>	<b>#</b>	<b>Music Episode</b>	<b>Parallel Psychological Episode</b>
Bach	1	Bright, open, spacious Felt at home in it	He was lifted upward into sky/open space
Beethoven x1	2	Ancient, sacred Saying something awesome, slowly The violin solo is both held by the orchestra, and free	Feeling awe  He felt absolute safety/absolute freedom; Completely supported by spiritual beings
Beethoven x2	3	A stepwise procession Rich, full, red Weaving connections (between soloist and winds)	He was moving towards a goal Safety/freedom/ support increased He felt connected to the spiritual beings He felt regret, self critical “I should have come earlier” He felt spiritually connected with deceased
Mascagni	4	Jarringly different Spiritual (organ) Chorus supports Asking for help (voice) Dramatic	He was strongly drawn towards a goal He felt complete spiritual connection and support  He arrived at peak spiritual feelings in a vast, open space
Canteloube x1	5	Simple, like a lullaby Delightful, tender, sweet Reedy (vocal timbre)	He felt light, safe  Music/fluid flows into his heart
Canteloube x2, 3	6	Reedy (vocal timbre)	Music/fluid flows throughout body His body is cleaned out of negativity

## 5.5 Michelle

### 5.5.1. Profile

Michelle is a thirty-seven year old female, married, with five year old twin daughters. She is an administrator at a private school for children with special needs. Her position is fulltime and she has been employed at the school for fifteen years. She describes her work as a “controlled chaos,” in which she is very happy.

Michelle’s childhood was rich with music. She danced ballet and tap throughout her childhood and adolescence, and had a minor in dance in college. As a child she felt a strong affinity for ballet music saying, "If the choreography was good, the music told me the steps." She also played clarinet in grade school, although without much investment. As a child, her mother sang constantly, often for her, and played a wide variety of records for her. She remembers, among others, listening to *Camelot*, *Johnny Mathis*, and *The Four Tops*.

As an adult, Michelle's daily life is filled with music. In graduate school she often listened to classical music because she needed an escape from words, but usually, and currently, her preference is for music with lyrics. She likes a wide variety of genres, especially popular and jazz. Spontaneous singing is the primary way she relates to music every day. She is always spontaneously making up songs when she is by herself. It is quite common for her to be spontaneously singing, dancing around, and changing lyrics to songs on the radio when she is at home by herself or playing with her children. She reports always hearing internal rhythms which she uses to help her work every day and says, "There is always music in my head. Sometimes it's in the background, but then I can become conscious of it." She also listens to music very often at home and in the car. She prefers the wide variety of music played on the radio, and always likes listening for new popular songs. The most powerful musical experiences in her life have been while dancing with her twins when they were very young.

Michelle has never had a GIM session and she has never been in therapy. Her current issues are: 1) being too critical of herself (being a perfectionist and always thinking, "Did I do a good enough job?") 2) being too cognitively oriented ("over-thinking") and defended against feelings, and 3) a need to increase her ability to communicate with others, especially in regard difficult topics or disagreements.

### **5.3.2. GIM session**

#### **Prelude**

Michelle reported that she was excited about the session, but felt somewhat preoccupied with what her family was doing at home. She spoke in a hesitant way about her current issues and was unsure about what to expect from a therapy session.

#### **Initial music selection**

The following fifteen pieces were selected as working pieces: Bach *Christmas Oratory (Shepherd's Song)*; Bach *Concerto for Two Violins, movement 2*; Beethoven *Piano Concerto #5, movement 2*; Beethoven *Symphony #7, movement 2*; Brahms *Symphony #3, movement 3*; Elgar *Wand of Youth, Moths and Butterflies*; Faure *Pavane*; Grieg *Cradle Song*; Haydn *Cello Concerto, movement 2*; Reger *Lyric Andante*; Schubert *Die Schoene Mullerin, der Neugirige*; Schumann *Fünf Stucke im Volkston, Langsam*; Tschaikovsky *Symphony #4, movement 3*; Villa-Lobos *Bachianas Brasileiras #5*; and Webern *Langsamer Satz*.

#### **Initial music assessment**

I asked Michelle to close her eyes and assessed her responses to three pieces in order to choose an initial piece of music. To Bach *Christmas Oratory (Shepherd’s Song)* she responded, “pretty, ballerinas on stage; to the *Beethoven Piano Concerto #5, movement 2* she indicated, “deeper. . . good” and to the *Bach Concerto for Two Violins, movement 2* she said, “sad.” Which feels like you right now? - Whether it’s sad or not, whether it’s deep or not, whether it’s pretty or not. She chose the *Beethoven Piano Concerto #5, movement 2*.

### Induction

The induction consisted of 1) a progressive relaxation for the body: “settling in, letting go, into the support of the mat”; 2) a here and now focus: “acknowledge your intent to do a piece of work. . . there is no right or wrong,” and 3) a bridge to the music: “feel your curiosity about how the music will sound. . .there will be something in the music for you today. . .now go deeper inside . . .take the time to open, and really listen to the music.”

### Music program

The music program for the session consisted of: three hearings of Beethoven *Piano Concerto #5, movement 2* and Schumann *Funf Stucke im Volkston, Langsam* (see Table 5.14).

**Table 5.14: Michelle music program**

Piece	Times Heard	Duration	Total Duration
Beethoven <i>Piano Concerto #5, mvt 2</i>	3	6:54	20:42
Schumann <i>Funf Stucke im Volkston, Langsam</i>	1	4:44	4:44
Total			25:22

### Verbal guiding interventions

Michelle’s verbal guiding interventions are listed in Table 5.15. Fifty-four guiding interventions were used; twenty one were music-centered.

**Table 5.15: Michelle guiding interventions**

Piece	Music-centered Interventions	Imagery-centered Interventions	Total Interventions
Beethoven <i>Piano Concerto 5, mvt 2</i>	4	12	16
Beethoven—second hearing	6	9	15
Beethoven—third hearing	7	6	13
Schumann <i>Funf Stucke im Volkston</i>	4	6	10
Total	21	33	54



**Music imaging** (see appendix L for full transcript of music imaging)

At the beginning [of the first hearing of Beethoven] she felt someone being freed – with a body sensation of lifting – and was not sure whether it was a man or woman. An image of a ballet taking place at the Wang Theater (in Boston) appeared and dancers were running around on stage. She watched the ballet from the audience, feeling its formality, enjoying its beauty, picking out her favorite dancers, and trying to discern its story.

[During the second hearing of Beethoven], the story of the ballet unfolded gradually to her. First she sensed that one person was searching for another, that one was female, and that it was taking place outside, near water, in the forest. The male and female dancers finally found each other and went offstage together, but this was without a feeling of resolution.

[During the third hearing of Beethoven] the story was similar, this time it was filled in with more specific details. The male dancer, in brown tights, was worriedly looking for the female. The female was alone and happy to be by herself, “doing her own thing.” He was the pursuer, she was hesitant and reflective. When the male dancer found her, they got to know each other as he danced, she danced, and they danced together. Although she was unsure about whether she would, in the end, stay with him, she went off with him “for now.”

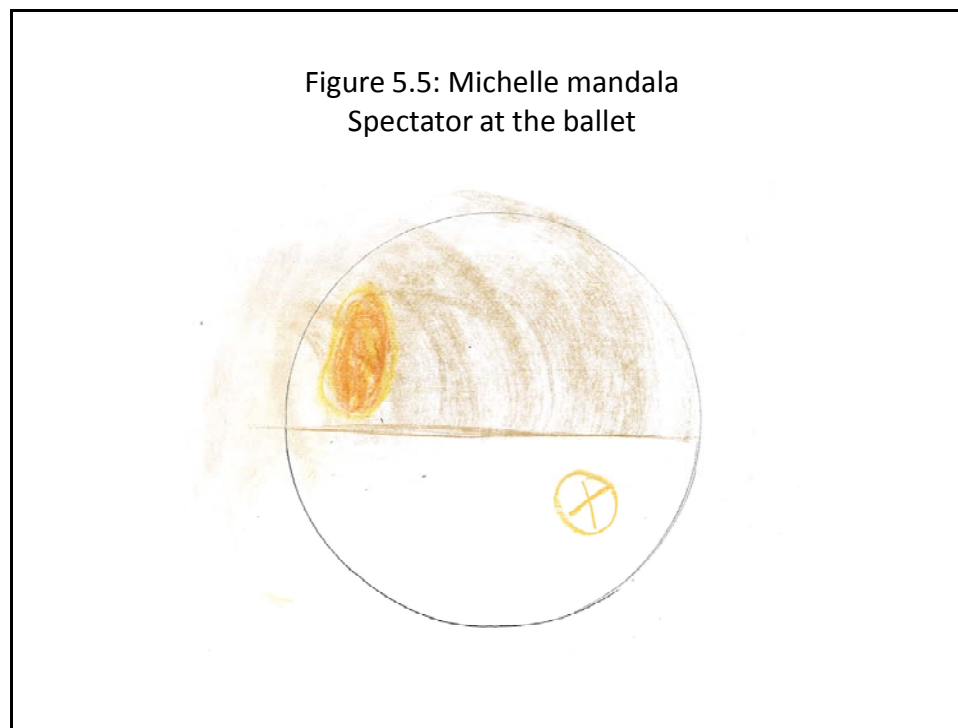
[In Schumann] the image of the ballet disappeared and she did not know where to go. She felt wistful and imagined the cellist playing the piece. She watched his movements as he played and, in the end, wondered about the composer of the piece and why he had composed it (what was its story?).

**Briefer summary of music imaging**

Two aspects of Michelle, the “searcher” part (that is open to new things in life) and the “decider” part (that reflects and questions) came forward as a male and female dancer, respectively, and these parts became partially integrated. The session concluded with a wistful feeling that was unexplored.

**Return/postlude**

Michelle drew a mandala (see Figure 5.5). She divided the circle in half from left to right. The top half was lightly covered in brown to represent the ballet stage; a bright yellow-orange oval connoting the dancers was on the right side. The bottom half was left white, except for a bright orange circle with an “X” drawn inside it, representing herself sitting in the audience.



At first, Michelle related to the imagery only as a story from the ballet. But further processing brought her the realization that the dancers represented “parts of myself that I knew but had never articulated in that way before.” She was excited and surprised with the discovery that the story was actually about *her*, that the ballet dancers were parts of herself, of her internal world. Her “owning” of the story allowed her to gain new perspectives about herself. She realized that she had been unaware of an underlying feeling of worry/anxiety when she does not have an immediate answer to a question. The music experience was clearly related to her current issue of “over thinking” and “perfectionism” and it gave her a new perspective with which she could approach situations of searching, deciding, and questioning. She learned that she did not need to be so anxious or worried about the feeling of not having an immediate decision, and that trying on a decision could be alright. In addition, she learned, “There are certainly many parts of me, and they don’t always have to be totally in harmony.”

Since this was Michelle’s first therapy session it was appropriate to focus solely on the new perspective she discovered about herself. The wistful feeling that emerged at the end of the music experience was not explored. Perhaps it was a yearning for a fuller exploration, or integration, of these two parts or perhaps it was simply a separate emotional issue that emerged at the end of the music program when there was not adequate time to explore it.

It is worth noting here that after her GIM session, in the interview, when Michelle initially heard the Beethoven movement (at that point, this was her fourth hearing of it), she felt herself becoming the ballerina onstage, feeling as beautiful and agile as a ballerina. This is included here because it signifies a shift in Michelle's stance from observer/audience of the ballet to an active participant in the ballet. This identification with the ballerina was probably facilitated by the postlude in which she had owned the story as her own, and it reflects a further deepening of her ownership, an increased internalization of the female (decider) part of herself. (This shift occurred spontaneously in the beginning of the interview and I did not follow up any further with processing it, except to support it briefly.)

### **Therapist's summary of GIM session**

Michelle's issues of "over thinking" and self-criticism were addressed in this session in several ways. First, she identified an underlying feeling of worry/anxiety in her over thinking, and was able to accept this. This is a deeper understanding and acceptance of her issue. In addition, the session suggested a new way to approach situations of searching, deciding, and questioning with less critical thinking. In general, this session was therapeutic for Michelle because it addressed her cognitive, simplistic thinking about her internal world and allowed her to identify, accept and appreciate her own internal complexity.

### **5.5.3. Vertical analysis** (see appendix R for full interview transcript)

#### **How Michelle *experienced* the music**

[During the first hearing of Beethoven] she heard the music going up, and when the piano entered she heard the music as tinkling, high and light. She was aware of the rhythms in the piece. She related to the music with an association that she always has with classical music; that it is formal and traditional.

[During the second hearing of Beethoven] she was especially aware of the light, high tinkling of the piano which sounded feminine to her. In retrospect, the initial music sounded masculine. The trills sounded like water, and she associated water with the forest. She experienced parts of the music coming together at the end, but at the end the music just got quieter, and drifted off.

[During the third hearing of Beethoven] the heaviness of the music brought the feeling of worry to the male dancer: "She's out there somewhere, I'm not sure where." At the conclusion

of the music she heard the two parts of the music come together, but this time realized that they were not totally “in synch.”

[During Schumann] she was very surprised at the sound of this piece – it was different from most classical music she knew (which was orchestral, rather than a solo instrument with piano accompaniment) and unexpected. She experienced the music as beautiful; more beautiful than the first piece. It sounded wistful and she pictured how the cellist would move if he were feeling wistful. She was curious about the composer and searched for the music’s story but did not find it.

### **How Michelle *understands* the music experience**

Michelle articulated a general understanding of the music experience as: “The music was a bridge that took me away from the conscious talking about myself and my inner feelings. It was more indirect, and it was less logical which is where I (usually) firmly reside. . . It created a feeling or mood that allowed me to go somewhere that I wouldn’t have gone otherwise. It took me outside of myself almost, it’s hard to define the mood or feeling. It wipes the slate clean; it provided an atmosphere, but I can’t put my finger on the mood or feeling .. I’m a very logical person and not at all that comfortable about emotions on a regular basis. [This] changed my perception of therapy . . . It can just be self-exploration. . . I have a new realization and new awareness about myself that I can go forward with.” This perspective on the music experience is intertwined with her perspective on the therapeutic process since this was not only her first music therapy session, but it was also her first therapy session.

Another perspective she articulated was that every piece of music has a story. For her, the story of the Beethoven *Piano Concerto #5, movement 2* was about a relationship in which a man pursued a woman who was unsure about the relationship. And because the piece ended with a musical non-resolution, the story was a “cliffhanger,” in which there was no decisive outcome for the relationship. She clearly heard aspects of the music that she associated with masculinity – the parts that were measured, very steady, rhythmic. Whereas the elements that were lighter and higher she associated with the feminine, especially the piano solos. During the interview, she stated that she felt affirmed and happy to hear the exact action of her images in the music (for example: she heard the music going upward when she had imagined something was being freed and feeling lifted; she heard the music’s fast rhythms when she had imagined the

dancers dancing quickly on stage). Although she could not find a story for the second piece, she felt it was there.

A significant aspect of Michelle's interview was the very strong feeling of ownership that occurred when she initially heard the opening strains of the Beethoven concerto movement during the interview saying, "This is *my* song! It was written for *me*!" In fact, she was shocked and perturbed as we listened to a section that she couldn't remember because she had such strong feelings of ownership of the piece. This process of ownership with the music in the interview is exactly the same process that occurred with her imagery in the GIM session. Whereas in the GIM session, the *story* became hers; in the interview, the *music* became hers. This aspect will be examined further in the next section.

### **How I understand Michelle's music experience**

The way Michelle related to the music in her GIM session was influenced strongly by her background as a dancer: she experienced the music as a ballet communicating a specific story. Michelle's first image was a memory of watching a ballet as she had when she was a child. She explained that her listening stance as a child was to always listen and watch; to find out what story the composer had embedded into music. She took this listening stance into the session. Her imagery was a ballet with a story line that took place in the theater of her childhood, and she used the approach of trying to decipher what story the music and dancers were trying to tell her.

In the prelude, Michelle was distanced from her inner world, in general and her feelings, specifically. This, and the fact that she experienced the ballet's plot as not being personal to her, is not uncommon for GIM clients who have not had any prior experience in therapy. Michelle was unaccustomed to relating directly to her internal world and was unfamiliar with working with emotional symbolism. Therefore, her session should be viewed from the perspective that the goal of this initial session was to teach her to utilize the GIM process in order to relate directly to her internal world.

Michelle experienced two music episodes (see Table 5.16). She heard the Beethoven *Piano Concerto #5, movement 2* three times and in each hearing, she experienced the story line that she felt was embedded in the music. Each time the story was reiterated, she was able to glean more visual and emotional details about the plot. Michelle's first music episode included all three iterations of the Beethoven movement. Initially, Michelle experienced the music ascending and had a felt sense of something being lifted, something being freed. Then she saw

herself at the Wang Theater, watching a ballet, judging the dancers, deciding who her favorite was, and trying to decipher the ballet's story line. When she experienced the piano solos as light, tinkling, and ascending, she felt them as feminine and imagined the ballerina dancing. The feminine solos were experienced as questioning, reflective, and tentative, yet with a feeling of being comfortable *by* herself, and feeling comfortable *with* herself (her identity). Other parts of the music, usually orchestral sections, were experienced as masculine; then she imagined the male dancer. Since the masculine music sounded heavy and worried, she imagined him worriedly searching for the female. Initially the male and female dancers were experienced separately, dancing solos. Then, when she heard both parts simultaneously, she imagined him finding the ballerina. She associated the trills in the music with water and imagined their meeting by a pond in a forest. In the development of the piece, she imagined solo dances and pas de deux as the dancers developed a relationship. She experienced the movement's conclusion as fading away and felt this as an exit offstage, with a sense of uncertainty on the part of the ballerina. The ballerina felt she was with her partner "for now," but the question of whether the relationship would continue was not resolved.

In the second music episode, the *Langsam* movement from Schumann's *Fünf Stücke im Volkston*, Michelle was surprised at the piece (she explained she listened to exclusively orchestral classical music and had never heard a solo piece with piano accompaniment) and so, the ballet disappeared and she felt she did not know where to go. The music sounded beautiful and wistful, and she became wistful. She imagined the cellist's movements as he played the piece and tried to figure out what story the composer was trying to convey. She could not figure out its story and began wondering about the composer and why he had composed the piece.

**Table 5.16: Michelle music episodes**

Music	#	Music Episode	Parallel Psychological Episode
Beethoven x 1, 2, 3	1	Music ascended Sounded formal Feminine piano solos Masculine orchestral sections Masculine and feminine music joined together Music was not totally in synch	Sense of something being lifted up, freed Watched the ballet Female dancer, alone and comfortable Male dancer, worriedly pursued the female The male dancer found the female dancer Exit, with unresolved relationship
Schumann	2	Beautiful and wistful	Felt wistful; imagined cellist's movements Unable to find the story line

To summarize, Michelle's music experience was a story that became gradually clearer over three repetitions with gradually increasing details and a clearer story line. She experienced the plot of the ballet as a story that had nothing to do with her until the postlude when she was able, after verbal processing, to introject the "music's" story as expressive of her internal world. Through this identification with the two characters as parts of herself she became aware and able to accept her own internal complexity. She understood the music's story to be analogous to aspects of her internal world and had the following insights: 1) that there are two disparate parts of herself that are in disagreement: a "searcher" that has anxiety and worry, and requires immediate resolution to problems and a "decider" that reflects, questions, and is not anxious about disagreements and resolutions; 2) that these parts can work together without the necessity for an immediate resolution. She identified an underlying anxiety as an issue in her daily life in regard decisions, and gained insight into her need to make immediate decisions. She was able to generalize the story's concept to her life: she felt she could allow herself to be more like the ballerina, to allow herself to be more reflective and comfortable without immediate resolutions to problems and decisions.

## **5.6. Bill**

### **5.6.1. Profile**

Bill is a thirty six year old male who has been married for five years. He is an artist who manages his own business on the internet using "Second Life," a 3-D virtual world website for

social/business networking. He works fulltime; his managerial work takes place during the day, and he paints in the evenings. He also does some lecturing and teaching, and travels to exhibit his work. He is in a life transition, having become self-employed two years ago after a decade as an administrative executive in a traditional 9-to-5 job. In his current and more creative work, he recently changed his art medium from abstract pastels to oil painting; a change he describes as a “long transition” from computer art to pastels to oils. His life is focused on working in his studio, running his business, and being with his wife, his dog, family, and friends.

Bill’s earliest memories of music are playing on an old piano at his grandmother’s house and creating his own instrument from his dresser drawers with rubber bands. He began playing guitar at twelve years old and it has continued to be a creative outlet for him. He is self-taught and plays by ear. He has played guitar and vocals in bands and acoustic duos. He has composed “sound art” – collages of natural sounds for performances, and sometimes collaborates with musicians on interactive music/art projects in which he paints while the musician improvises. He likes, listens to, and plays a wide variety of genres, except for Country Western music. The genre that he often listens to is heavy metal (for example, *Rage Against the Machine*) and *Rush* is the group he has listened to the most. He reported that within classical music he is drawn to pieces with stronger emotion such as Stravinsky’s *Rite of Spring*, or Segovia playing guitar.

Bill was in therapy once briefly as a child (brought into his parents’ couples therapy session). His current issues are: 1) being overweight (he has lost fifty pounds within the past year and is currently on a regimen of dieting and exercising daily), 2) anxiety associated with the direction of his business (he is always thinking, “Am I where I want to be?” and feeling that decisions may “make or break my career”) and 3) a need to trust himself, to follow his instincts, to be “unknowing” without anxiety.

### **5.6.2. GIM Session**

#### **Prelude**

Bill reflected on his current issues and his relationship with music. He was curious about the session; he was relaxed and felt neutral – as if he could “either take a nap or a walk.”

#### **Initial music selection**

The following fourteen pieces were initially selected: Bach *Little Fugue in G minor*; Brahms *Symphony #3, movement 3*; Debussy *Dances Sacred and Profane*; Elgar *Enigma Variations #8, 9*; Faure *Pavane*; Grieg *Holberg Suite, Air*; Holst *The Planets, Venus*; Haydn



*Cello Concerto, movement 2; Pierne Concertstuck for Harp; Respighi Pines of Rome, Gianicolo; Reger Lyric Andante; Shostakovich String Quartet #3, Allegretto; Strauss Death and Transfiguration, Transfiguration only; and Wagner Overture to Lohengrin.*

### Induction

The induction included: 1) a full body relaxation using the theme of the breath helping to open the body, 2) a here and now focus, and 3) a bridge to the music: feel open, and a curiosity for how the music will sound. . .there will be something in the music for you today. . .all you need to do is to open and listen deeply.”

### Music program

The music program for the session consisted of: Respighi *Pines of Rome, Gianicolo*, Strauss *Death and Transfiguration, Transfiguration only*, Brahms *Symphony #3, movement 3* repeated twice, Debussy *Dances Sacred and Profane*, and Faure *Pavane* (see Table 5.17).

**Table 5.17: Bill music program**

Piece	Times Heard	Duration	Total Duration
Respighi <i>Pines of Rome, Gianicolo</i>	1	6:25	6:25
Strauss <i>Death and Transfiguration (excerpt)</i>	1	6:14	6:14
Brahms <i>Symphony #3, mvt 3</i>	2	5:36	11:12
Debussy <i>Dances Sacred and Profane</i>	1	10:31	10:31
Faure <i>Pavane</i>	1	7:54	7:54
Total			42:16

### Verbal guiding interventions

Bill’s verbal guiding interventions are listed in Table 5.18. Seventy-five guiding interventions were used; of these, 26 were music-centered.

**Table 5.18: Bill guiding interventions**

Piece	Music-centered Interventions	Imagery-centered Interventions	Total Interventions
Respighi <i>Pines of Rome, Gianicolo</i>	3	7	10
Strauss <i>Transfiguration</i>	1	4	5
Brahms <i>Symphony 3(3)</i>	3	11	14
Brahms—second hearing	7	4	11
Debussy <i>Dances Sacred and Profane</i>	7	19	26
Faure <i>Pavane</i>	5	4	9
Total	26	49	75

**Music imaging** (see appendix M for full transcript of music imaging)

[During Respighi] he imagined nighttime turning to daylight at first, then a forest awakening. He felt there was some danger in the distance, then a flash of patterns of light and the Wizard of Oz. The forest returned, but became more meadow-like.

[During Strauss] he imagined an exciting cruise ship on a voyage, and then focused on the ocean. The music became overly dramatic and cheesy and this created a romance on board the cruise ship. Next, he felt overwhelmed and opened his eyes to stop this feeling.

[During the first hearing of Brahms] in black and white, he imagined a couple dancing classically on the cruise ship. There was an interlude in which he was an audience member listening to the piece. Everyone, including Bill, was only listening because they were supposed to. Then he returned to the dance on the ship.

[During the second hearing of Brahms] he felt the music was trying to grab his attention, like a little wave that could not reach him. This was boring; he listened to the music while his mind wandered. He remembered looking at photographs of an elephant and a dome, and conversing about them with a colleague.

[During Debussy] the elephant became animated, and a mouse appeared. Then he was moving through piles of hay noticing the needles. He felt a very strong, uncomfortable pulsating in his whole body and saw pulsating, strong red lines at the sides of his vision with nothing in the center. He felt something was wrong and sat upright. The pulsating subsided and he relaxed. He had several experiences of spinning: a wagon wheel, an antenna signal, and finally he felt that both he and the music were spinning, but not together and this was disorienting.

[During Faure] he heard footsteps beginning a journey. The scenery unfolded and became richer and revealed that he was walking alongside a river and over a stone bridge. Something sad and surprising happened and everything turned black and white: a man had taken away a woman's baby. He heard a feeling of happiness and contentment. At the end the elephant and mouse returned, the mouse dressed in Arabic circus clothes.

**Return/postlude**

Bob drew one mandala (see Figure 5.6) and five additional pictures (Figures 5.7 – 5. 11).

Figure 5.6: Bill mandala  
Red, white, and blue



Figure 5.9: Bill picture #4  
The elephant



Figure 5.7: Bill picture #2  
Cruise ship

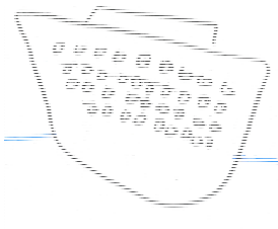


Figure 5.10: Bill picture #5  
Pulsating

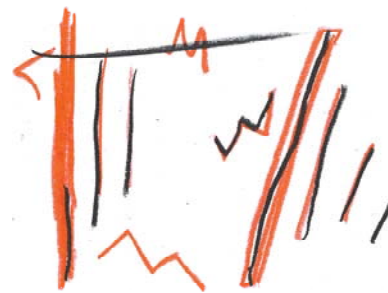


Figure 5.8: Bill picture #3  
The suave dancer



Figure 5.11: Bill picture #6  
A journey with a surprise



He drew the initial mandala, Picture #1 at my request. Within the circle, in blue, he drew a single line, two adjoining lines, and an abstract shape. A single red line extended from the top center of the page to the bottom corner of the paper, and two red abstract figures were drawn to the left of the circle. He titled it “Red, White and Blue.” He suggested it would be easier to draw his images (since he is a visual artist) rather than talk, so he drew five additional drawings (without the mandala circle). Picture #2 (see Figure 5.7) is a cruise ship outlined in black with many windows, and the ocean is indicated by a blue line on either side of the ship. Picture #3 (see Figure 5.8) shows a dancing couple outlined in black with a circle of blue around them. Picture #4 (see Figure 5.9) is an elephant outlined in blue with red vertical lines to each side of him and horizontal, grey shaded lines behind him. Picture #5 (see Figure 5.10) depicts red lines that are mostly vertical and straight, but some are jagged and one, at the top, is horizontal. Most of the lines are accented with black. Picture #6 (Figure 5.11) depicts a river drawn from the bottom of the page to the top, with green circular patterns filling the page to the left and a red bridge at the top. At the right of the bridge, drawn in stick figures, a man is taking a woman’s baby.

He identified the following insights, in order of importance to him:

- His use of music while painting was too patterned and felt inspired to consider new approaches to music and painting that used a deeper state of consciousness.
- The elephant represents his being overweight and the feeling of stomping around. It brought forth the question of the direction of his career because the elephant was not going in any direction.
- The cruise ship was the part of him that is huge and not balanced. In addition, his wife has a fear of cruise ships and this represents her dislike of this part of him.
- The male dancer on the cruise ship represents the suave, debonair, “show off,” happy part of him. This part of him comes out only about once a year, at parties. He was not comfortable with this part of himself.
- He felt confused about the emergence of the feeling of pulsating and danger. It felt like something was going wrong. He could not relate to this in any way, but he felt good that he did not stop it; he just let it go away.
- The scene in which a man takes away a baby represents the possibility that he and his wife may not have children.

### **Therapist's summary of GIM session**

Bill's current issues – weight reduction, anxiety about his career direction, and fatherhood – were expressed in the analogies of the elephant, cruise ship, and the baby taking figure. These images helped him to more clearly identify and accept these issues in his life. In addition, the session stimulated creative directions for his painting with music.

### **5.2. 6. Vertical analysis of data** (see appendix S for full interview transcript)

#### **How Bill *experienced* the music**

[During Respighi] the tones collided with each other and created some dissonance. There was a staccato interlude and the ending music had more openness – it was minimalistic and there were real bird sounds.

[During Strauss] the music followed a pattern: slow start, slow build up, crescendo, and then the end. He felt bored with this pattern.

[During the first hearing of Brahms] the music was boring; he was listening only because he was supposed to (compliantly). The music sounded old fashioned and like a waltz, and he got stuck in that sound.

[During the second hearing of Brahms] he heard the crackling of the LP (my MP3 recording is from an LP) and it reinforced the feeling that the music was old fashioned. He felt the music was trying to grab his attention like a little wave, but it could not reach him and so it was boring to him.

[During Debussy] the music was more interesting because it had one more layer: the harp. Its plucking was not totally in rhythm with the other instruments. The notes were chasing each other and the rhythmic elements stood out.

[During Faure] the louder section with the accents stood out.

#### **How Bill *understands* the music experience**

[During Respighi] the staccato interlude brought the patterns of light, and the minimalistic ending with the bird sounds changed the forest into a lighter, more open meadow with no trees.

[During Debussy] he related his feeling of moving, of searching, to the more active rhythms in this piece. He could find nothing in the music that had contributed to the uncomfortable physical sensation of pulsating.

[During Faure] He related the feeling of the sad surprise to the louder, accented section

of the piece.

Although Bill had only these few specific comments in regard how he understood the different pieces that comprised his music program, he was able to understand his general feeling of disengagement from the music by contrasting how the music felt with what he needed, but did not get, from it. Table 5.19 summarizes his description of the inadequacies of the music program. Despite this, Bill felt that the music program had been therapeutic for him: “By making me feel comfortable or uncomfortable the music dropped me into myself so I could express certain stories or feelings that I could never have reached any other way.” He conjectured, “Perhaps there are invisible and soundless rhythms happening in me all the time – melodies I’m uncomfortable with, beautiful melodies, rocking songs. Then the music streamed right in and picked up a couple of things and pulled them out.”

**Table 5.19: Bill music program inadequacies**

<b>Description of the music program</b>	<b>Description of needs: I need . . .</b>
Music felt too unfamiliar	Music that feels more familiar, like home
Music’s voice did not reach me	Music with a voice that can reach me
I could not hear a voice in this music	To hear a clear voice in the music
I could not relate to this music	Music that I can relate to
I could not relate, physically, to the musicians	To relate to the musicians (“I can play that”)
The technology was too old (hiss, crackles) which created a feeling of distance	New technology to create a feeling of being here, now
Music was too expansive	Music that is more direct
Music was too refined	Music that is more improvisatory
Music was too predictable: pattern of slow beginning, slow build, crescendo, end	Music that is more spontaneous, with more deviations
Music was not enjoyable	Music that is more enjoyable
Music was too old fashioned	Music that is more present

### **How I understand Bill’s music experience**

Although Bill was able to experience some aspects of his internal world in relation to the music program, on the whole, his relation to it was distant, uninvolved, and devoid of interest and enjoyment. This was aptly expressed in two of his images from his session: 1) a wave trying, but failing to reach him and 2) sitting in a concert hall compliantly listening to music with others in the audience who were also compliantly listening. In the interview Bill confirmed that he could not relate to the music; he had heard only the most general, uninteresting pattern in each piece: start, build up, crescendo, and end. Therefore, almost the whole program was quite boring

to him (“I’ve heard music composed this way thousands, hundreds, dozens of times before”) and when he became aware of the “crackling” of the LP sound, this added to his difficulty of relating to the music.

Bill’s distant relation to the music in this session deserves further examination in regard 1) his prior relationship with music and 2) the music choices that were made for this session.

In Bill’s daily life, music’s primary function is for spontaneous self expression. In his current relationship with music, and in fact for most of his life, his main form of expression has been heavily focused on playing improvisatory guitar. He listens mostly to jazz, popular, and rock music, often live bands, and he explained that the listening aspect that he enjoys most is identifying himself with the musicians playing. His relationship with music consists of seeking out spontaneous, improvisatory, and usually live music. The classical music of this program did not afford him the here and now feeling of a live, spontaneous performance in a genre that he enjoys, and he had no opportunity for a personal identification with the musicians. In addition, he explained that he was unable to “tune out” the LP crackling he heard with several pieces which was a constant reminder of the music’s “there and then” character instead of his preferred listening mode. I understand Bill’s distance from the music and his feeling that the music could not reach him as a failure of the music selections to provide him with a feeling of being “at home” in the music. In retrospect, I believe that a classical piece such as the Rodrigo *Concierto de Aranjuez*, movement 2 with its extended and improvisatory-sounding guitar cadenzas would have served to bridge the “listening gap” between Bill’s musical preferences and the classical music of the GIM session<sup>1</sup>. Although there was a large gap between Bill’s listening habits and this session’s music, music preference in and of itself does not usually result in a distanced relational attitude towards the music in GIM such as Bill experienced. Another contributing factor to the gap between Bill and the music program may have been in the area of his emotional needs. During the session he expressed feeling overwhelmed twice by the music: he felt strong anxiety in the Strauss movement and uncomfortable physical sensations of pulsating accompanied by a feeling that something was going wrong during the Debussy dances. In both

---

<sup>1</sup> At first, I considered putting this piece into my initial pool of music. However, I rejected it because I had used this piece with John, another participant in the study, who was a guitar player. I recall, in that moment, not wanting to re-use a piece that had already been used in this study. I also felt embarrassed because the choice of the Rodrigo concerto for two male guitar players appeared completely “prescriptive” (my embarrassment: would I be so reductionistic as to choose this Rodrigo concerto for every male guitar playing client?)

instances he felt the need to open his eyes because of the discomfort created by the music. This was a clear indication that these two selections were too strong for him, that they had stimulated too much internal tension for him to manage with his eyes closed. In retrospect, it is obvious that these too strong music choices caused, or at least, exacerbated Bill's distant relating to the music.

It is possible to identify six music episodes in Bill's music experience that relate to each piece of music, including the repeated Brahms movement (see Table 5.20). In his first music episode with the Respighi movement, Bill experienced several images with the theme of awakening and lightening, and a sense that there might be danger in the distance. In the second episode with Strauss, a sense of excitement turned cheesy and dramatic and metamorphosed into anxiety (he felt overwhelmed and I suggested he open his eyes). In the third episode when he heard the Brahms movement for the first time, he primarily experienced listened compliantly to the music. In episode four, when the Brahms movement was repeated, he expressed his growing distance and boredom with the repeated music in an analogy: a wave that repeatedly tried, but could not reach him. A recalled memory at the end of this episode became animated at the beginning of the Debussy dances, the fifth episode, and subsequently he experienced strong uncomfortable body sensations that were sometimes with, and sometimes out of synch with, the music. Faure, as the final music episode, brought a surprising end: a short journey with a sad, surprising ending.

**Table 5.20: Bill music episodes**

<b>Music</b>	<b>#</b>	<b>Music Episode</b>	<b>Parallel Psychological Episodes</b>
Respighi	1	Awakening to the music	Awakening, but with distant danger
Strauss	2	Overwhelmed by the music	Excited → cheesy → overwhelmed, anxious
Brahms x1	3	Compliant listening	Dancing → compliant listening → dancing
Brahms x2	4	Distanced from the music	Wave trying to reach him → boring → recalled memory of elephant
Debussy	5	Overwhelmed by the music	Animated elephant/mouse → moving → pulsating → spinning (uncomfortable body sensations)
Faure	6	A journey in the music	Journey → man takes baby → content

In summary, Bill had beginning and ending experiences with the music in the first and final episodes, mild discomfort with the repeated Brahms piece in episodes 3 and 4, and significant discomfort in episodes 2 and 5. In regard all of the music on the GIM program, in



general, he felt distant and uninvolved with this music program; it was not enjoyable and it did not reach him.

## 5.7. Conclusion

This chapter's vertical analysis illustrated the unique perspective on the music experience that each participant gained from his or her GIM session and interview. I strove to open my own perspective to understand the client perspective as fully as possible. This was accomplished by describing the unfolding music experience in episodes. For Hillary and John, explicit music experiences were described; for Nancy, Deval, Michelle, and Bill, the parallel psychological (imagery) process was described. Before moving to the horizontal integration of these interpretations, it may be helpful to summarize, succinctly, the nature of the music relation that developed between the participant and the music.

1. Hillary: The music felt like a powerful authority that required submission, but once she surrendered to it, it nurtured and supported her. When she accepted its authority, it gave her a message: to be still. When she became still, she was reclaiming her “true” self – the self she had lost after the miscarriage. This part had strength, acceptance, and stillness. After the session, she realized that although it had seemed like the message had originated from within the music, it had actually come from inside her. “What I heard in the music was actually *me* having the insight. So, actually I put my own authority/power into the music and then I found it there.”
2. John: The music was filled with humanity and wisdom about the deepest questions in life. Once he got inside the piece, he could feel its message: that life is filled with turmoil, yet it is beautiful and worth living. Then, he let go of what needed to happen next to experience the beauty in the music's elements and its unfolding. From this he felt completely alive, in the present moment – on a visceral level.
3. Nancy: The music was so aesthetically beautiful that it motivated her to not only do what it suggested, but to want to *become* like it. So, when she heard qualities that she had judged negatively within herself (like her slowness) as beautiful in the music, then she could accept those qualities as positive within herself. Once she did this, the music came inside her and brought out the deepest positive resources from her internal world: qualities of acceptance, clarity, and confidence; as well as the sense that she is where she needs to be in her life. The

key to this experience was her utter confidence and trust in the forward motion, the structure, of the music.

4. Deval: The music felt like home, so he could open himself emotionally and spiritually to it; and he could allow it to direct him. He followed the music's direction and it led him on a path – beyond where he could ever imagine – to a place of deep spiritual connection with himself and his deceased family members.
5. Michelle: She listened to the music cognitively, trying to understand its meaning. Although she was able to understand its meaning, it did not touch her internal world until it had ended and she reflected upon the experience. The music relationship took the form of deciphering the story of a ballet. When the music was over, upon reflection she recognized that the characters in the story were parts of her internal world and so, it was great to discover that the story was her own, not the composer's.
6. Bill: He wanted the music to reach him but it was not present enough for him to become involved in it. So when it failed to reach him, he kept his distance from it and just listened compliantly. Nevertheless, the music did help him make contact with internal ideas that nothing else could reach.

These descriptions can be seen within the psychodynamic notion of transference. Since the music was the primary therapist of the session, a transferential relationship was initiated at the beginning of the music program and progressed through different episodes to its conclusion (or in Michelle's case, to a conclusion in the postlude). Each participant's music relation had a unique character that could be called his or her music transference (see Summer, 1998 for further explanation). These culminating descriptions confirm that, except for Bill, each participant's transference relation strengthened and transformed by the end of the GIM session. For Hillary, John, Nancy, Deval, and Michelle, their client-music relation may be seen as a corrective relational experience, a healthy "re-parenting by the music (see Summer 1992, 1995 for psychodynamic theory regarding re-parenting).

## Chapter 6: Horizontal Analysis

This chapter consolidates the findings from the vertical case studies into a horizontal analysis. Three layers of horizontal analysis were conducted. Each corresponded, respectively, to the study's three research questions (see section 4.9 for the complete description of the data analysis). The first two layers of analysis became merged together. Therefore, the answers to the first two research questions: “*How* did participants experience the music?” and “How did participants *understand* the music experience?” were also integrated. These two research questions were answered by the thirteen themes presented in Section 6.1. The third layer of the horizontal analysis answered the third research question: “How do *I* understand the music experience?” Section 6.2 presents the answer to the third research question which is a description of a twofold music and imagery process. Throughout each layer of horizontal analysis it was necessary to utilize a circular process that re-examined layers one through three of the vertical analysis. This assured that my understanding of the music experience would be as closely related as possible to the client perspectives. In each section, illustrations and clarifications from the vertical case studies are given to support the horizontal analysis.

### 6.1. Research questions 1 and 2

The first two research questions were: *How do participants experience the music portion of a music-centered GIM session?* And *How do participants understand their music experience?* The following thirteen themes were extrapolated from the client perspectives in the six vertical case studies. Table 6.1 shows, in brief, their distribution, and subsequently they are listed with illustrations from the data. The first three themes are elements that are very basic and not particular to music-centered GIM. They are reflective of a first-time music therapy client perspective.

**Table 6.1: Client perspectives: Horizontal themes**

Theme	Hillary	John	Nancy	Deval	Michelle	Bill
Participant related personally to the music <sup>1</sup>	(X)	(X)	(X)	(X)	X	
Music brought attention to an internal conflict <sup>1</sup>	(X)	(X)	(X)	(X)	X	X
Music brought a new, useful perspective <sup>1</sup>	(X)	(X)	(X)	(X)	X	
Music was regarded with respectful attention	X	X	X	X	X	X
Music provided direction	X	X	X	X	X	X
Music was completely dependable	X	X	X	X		
Music brought a receptive, transpersonal experience	X	X	X	X		
Music gave access to the true self	X	X	X	X		
Music gave a message to accept previously marginalized aspects of the self	X	X	X	X		
Music brought a bodily experience	X	X	X	X		X
Music brought a here and now experience	X	X	X			
Music was aesthetically beautiful		X	X	X	X	
Participant merged with the music	X	X	X			

*Theme 1: The participant related personally to the music*

- Michelle: Surprised that the music experience was related to her internal world.

*Theme 2: The music brought attention to a specific internal conflict*

- Michelle: Became aware of her anxiety about decisions in her daily life
- Bill: Increased his awareness of two issues that needed to be addressed– being overweight and the question of having a child

*Theme 3: The music brought a new, useful perspective*

- Michelle: Insight that she could tolerate indecisiveness; which would help to reduce her daily anxieties.

*Theme 4: The music was to be regarded with respectful attention*

- Hillary: Music was a powerful authority.

---

<sup>1</sup> Themes 1-3 were not specifically mentioned by Hillary, John, Nancy, and Deval, the four non-MTs because they are basic to all music psychotherapy experiences. However, Table 6.1 indicates their inclusion --- with the indication: (X) – because each of these themes can be implied to be present.

- John: Music was a wise archetypal grandfather.
- Nancy: Music was a beautifully aesthetic transpersonal experience.
- Deval: Music directed him to a spiritual experience.
- Michelle: Music told a story to be deciphered.
- Bill: Even if the music fails to reach you, you still have to listen (compliantly).

*Theme 5: The music provided direction*

- Hillary: The music (as the cape) pushed her forward.
- John: Needed to listen to the music (the grandfather) deeply to hear his message.
- Nancy: The music's slow development and the vocal entrances moved the experience forward.
- Deval: The music led him on his path.
- Michelle: The music told the story.
- Bill: The music tried to reach him.

*Theme 6: The music was completely dependable*

- Hillary: Trusted the music's authority completely, and the way it nurtured her.
- John: Trusted the music's humanity.
- Nancy: Trusted completely the music's gradual unfolding, and its beauty.
- Deval: Trusted completely the music's help and direction.

*Theme 7: The music brought a deeply receptive, transpersonal experience (a deeply profound experience beyond the personal self)*

- Hillary: The music, experienced as something beyond her, filled her with strength.
- John: The music, experienced as a grandfather figure, brought him age-old, existential wisdom.
- Nancy: The music brought a spiritual experience of clarity.
- Deval: The music brought a spiritual, peak experience of connectedness.

*Theme 8: The music gave access to the true self*

- Hillary: Music gave access to her true nature which is still, strong, and self-accepting.
- John: Music gave access to feeling completely alive within himself in the here and now.
- Nancy: Music gave access to her slowly developing positive essence.
- Deval: Music gave access to his deep, spiritual self.

*Theme 9: The music gave a message to accept previously marginalized aspects of the self*

- Hillary: Message to accept her loneliness and vulnerability (previously rejected), and her true nature, especially its need for stillness (previously inaccessible).
- John: Message to accept, and feel deeply, his life's turmoil (previously experienced with anxiety).
- Nancy: Message to accept the slow pace of her life (previously judged as negative, and rejected).
- Deval: Message to accept his internal, self sustaining spirituality (previous tendency to seek external emotional sustenance).

*Theme 10: The music brought a bodily experience*

- Hillary: Music poured into her body.
- John: Rode on the music and it brought him to life in his body.
- Nancy: Music flowed into her heart.
- Deval: Music flowed through his body.
- Bill: Music brought uncomfortable bodily sensations.

*Theme 11: The music brought a here and now experience*

- Hillary: Whereas prior to the session she was distanced from herself, the music connected her to herself, allowing her to be more fully present in the here and now.
- John: Music brought him an experience of being fully human, viscerally present in the here and now, living in every tone of the music.
- Nancy: When the music brought her an acceptance of her current life situation, she felt that she was exactly where she should be, and she came fully present in the here and now.

*Theme 12: The music was experienced as aesthetically beautiful*

- John: Experienced beauty in the musical language and other compositional elements of the piece.
- Nancy: Experienced beauty in the unfolding structure of the pieces.
- Deval: Experienced beauty in many compositional elements of the pieces.
- Michelle: Experienced beauty in the ballet music and the wistful cello piece

*Theme 13: The participant merged with the music*

- Hillary: Merged with the music when it poured into her head.

- John: Merged with the guitar solo and dialogued with the orchestra.
- Nancy: Merged with the vocal soloist and was supported by the chorus.

To summarize the client perspective: All of the participants regarded the music with respectful attention and it provided the direction for the session. To the four music therapists – Hillary, John, Nancy, and Deval – the music sounded aesthetically beautiful (except for Hillary) and felt dependable so they listened deeply and receptively, they followed the music’s direction, felt it in their bodies and in the here-and-now (except for Deval), and they merged with it (except for Deval). This brought each of these four participants a transpersonal experience in which they accepted marginalized aspects of the self and gained access to their positive core self.

In regard the two non-music therapists, Michelle felt the music as personally related to her and aesthetically beautiful, and it brought her a new, useful perspective in regard an internal conflict. Bill did not relate personally to the music, it did not bring him any new perspective, yet it did bring him a bodily experience and directed his attention to internal conflicts.

## **6.2. Research question three**

The third research question was: *How do I understand the music experience in music-centered GIM?* My interpretations from each of the vertical case studies were consolidated into a conclusion: In the music-centered GIM sessions, two separate interdependent processes had occurred: a relational process with the music and a projection-reintrojection cycle with the imagery.

### **6.2.1 Relational process with the music**

A therapy session can be analyzed by separating out the overt “content” of the session to reveal the underlying “process” that occurred (Yalom, 1985). In verbal therapy this is accomplished by separating the verbal content – what was discussed – from the relational process that unfolded between the client and therapist during the verbal dialogue. When a GIM session is divided between “content” and “process,” the imagery content is separated from the client-music relation. The following is a “process” analysis which sets aside imagery content from the session as much as possible. It follows, and describes, the unfolding of the client-music relation from the beginning to the end of the music program. The material from the music episodes of each participant has been reduced and labeled with the following relationship parameters: external or internal relation, and impersonal, personal, or transpersonal relation. The transpersonal relation was further categorized as archetypal, spiritual or peak. In addition, the

music was categorized as either as an object or as an unfolding experience. The client-music relationship, experienced in a linear manner during each participant's session, is described below, and summarized in Table 6.2.<sup>2</sup>

### **Bill**

Bill's prior relationship with music included listening to music while painting. Although he was quite used to music stimulating visual images for him, these images were a form of artistic expression which he did not "personalize" to his internal world. Bill approached this music listening experience in the same way as his painting with music: the music created images and as they occurred he did not personalize them.

Bill was the only participant who had a negative reaction to the music and whose relation to the music program did not transform, although during the program, he experienced some vacillating shifts in openness and distance in his relation to the music. In episode one Bill was open towards the music, but in episode two the music became overwhelming to him. Therefore, in episodes three and four, he became closed and distanced himself from it. In episode five he again felt overwhelmed by the music and distanced himself from it again. In episode six, the final piece, he was again more open towards the music and it did not overwhelm him. His relationship fluctuated in this sequence: open, closed, closed, open, and he experienced this fluctuation in a sensory/emotional mode. Although he shifted in his stance towards the music by opening and closing, it cannot be said that his overall relational capacity towards it was actually changed during the music program, especially since it ended similarly to the way it began. In the postlude Bill was able to personalize several of the images that had occurred during the music, but he still did not personalize the relationship with the music. He was the only participant whose music relation became more closed and distant during the music program, and whose relation, in the end, did not change at all during the music program and the postlude. In summary, Bill's relational capacity to the music remained as an impersonal, external object in his session.

### **Michelle**

---

<sup>2</sup> In this chapter the participants are presented in a different order: Bill, Michelle, Hillary, John, Deval, Nancy. This order begins with Bill whose initial relation to the music was the most external and progresses to Nancy, whose initial relation was the most internal.



Because she identified classical music with the ballet of her youth, Michelle approached this music listening experience in the same way she had watched ballet as a child. Throughout the whole music program (episodes one and two), she experienced the music as an external object that was related to her cognitively (it was to be deciphered, or understood). Although she experienced an increasingly more detailed story as the music program progressed, her relational capacity towards the music did not change. However, in the postlude during the verbal processing, she recognized that the story she had heard within the music had been her own internal story, projected onto the music. She then exclaimed that the story and the music were now *hers*, and that it even felt like the music had been written for her. This feeling of ownership was an indication of the newly opened dimension in her relationship with the music. In the postlude, she understood that her experience of the music was directly connected to the contents of her internal world. To summarize, for Michelle, the music changed from an external object to which she related impersonally to an object with which she could directly relate to her internal, personal world. This change probably did not occur until the postlude because Michelle is a first-time GIM participant.

### **Hillary**

Hillary began her experience relating to the music as a personal, external object. The music was an object related to her, yet outside herself (a cloak around her shoulders) to which she actively responded (threw it off, onto the ground). Subsequently, the music became a transpersonal experience to which she surrendered. She felt the music as transpersonal (beyond human) and as its qualities and a noetic message poured into her head, she was transformed through her receptive experience of the music. In summary, Hillary's relation to the music changed from a related, external object to an internal, transpersonal experience. The mode of her relation was sensory and noetic.

### **John**

At the beginning of the music program in music episode one, John experienced the music as external to him: it told him stories that were experienced in a sensory/emotional mode, and there were disparate dialogues that became united into one in the end. The first shift occurred at the beginning of music episode two, when his experience of the music changed from being external to internal. He became the guitar and felt that he was inside the music. The second shift occurred soon after, when he heard within the music a wise, archetypal grandfather that brought

wisdom to him that was beyond his personal reach. In this shift the music became a transpersonal object, the archetypal grandfather. Subsequently, throughout the second episode, John became more and more involved in the music through a sensory, bodily, here and now relation with the music (“riding” on it; living in every tone). To summarize, John’s relationship with the music shifted from an external object to an internal, transpersonal, archetypal object. In addition, the mode of his relation changed to an internalized body relation. In the end, John had an internalized, body-oriented direct encounter with the music. The relation changed from external to internal, and it intensified through the body in its directness.

### **Deval**

After the first piece of music, throughout episodes two and three, Deval was in a sensory/spiritual mode, relating to the music as an external, transpersonal, spiritual object. In episode four, this changed from external, transpersonal, and spiritual to an internal experience that intensified dramatically into a transpersonal, spiritual peak experience. In episode five, his mode of relating broadened to include his body. To summarize, Deval’s transpersonal/spiritual relationship with the music evolved from being an external object to an experience that was internal, transpersonal, spiritual, and peak, and culminated in an internal, body experience.

### **Nancy**

In the first piece of music in Nancy’s music program (music episodes one, two, three, five, and six), Nancy related to the music as a transpersonal object that was external to her. It transformed her through her receptive experience of it. Throughout these music episodes, she related to the music as a sensory/emotional/body experience. In the next piece of music (episodes seven, nine, and ten), the music shifted to an internal, spiritual experience. In other words, the relation was still transpersonal, but it intensified into a spiritual experience. In addition, Nancy experienced two episodes (music episodes four and eight) of intensified receiving (taking in) of the music. These two episodes also contributed to the intensification of the relation with the music. In summary, the nature of Nancy’s relation was internal and transpersonal and it deepened into a spiritual experience.

### **Summary**

The two non-music therapist participants, Bill and Michelle, began the music program with an external, impersonal relationship with it. (As first-time GIM clients, this is not an unusual beginning stance.) During the music program, neither changed their relational capacity

towards the music. Michelle experienced a deepening in the music relation during the verbal processing after the music had concluded. Bill had a negative reaction to the music program with slight fluctuations in his relational capacity towards it, but in the end the relationship remained essentially unchanged. Hillary, John, Deval, and Nancy, the four music therapists, all experienced a deepening in their relationship with the music as the program unfolded.

**Table 6.2: Participants’ music relation**

<b>Participant</b>	<b>Initial music relation</b>	<b>Changed music relation</b>	<b>Mode of experience</b>
Bill	External, impersonal object	No change	Cognitive, sensory, body
Michelle	External, impersonal object	External, personal object (in the postlude)	Cognitive, sensory
Hillary	External, personal object	Internal, transpersonal experience	Cognitive, sensory, emotional, noetic, body
John	External, personal object	Internal, transpersonal, archetypal experience	Cognitive, sensory, emotional, body
Deval	External, transpersonal, spiritual objects	Internal, transpersonal, spiritual, peak experience	Cognitive, sensory, emotional, noetic, body
Nancy	Internal transpersonal object	Internal, transpersonal, spiritual experience	Cognitive, sensory, emotional, noetic, body

### 6.2.2 Projection-reintrojection cycle

The connection between fantasy, imagery, and the defense mechanisms of projection, identification, and re-introjection has been described by Melanie Klein (Segal, 1974). In projective identification “parts of the self and internal objects are split off and projected into an external object which then becomes identified. . . with the projected parts (p. 27) This is the basis of symbol formation: when part of the self is projected into an object, the object becomes identified with (symbolic of) that part of the self. Through interaction with the external object, the self-part can subsequently be introjected back into the self. This process is the earliest form of empathy. Kreitler and Kreitler contend that works of art are fertile objects for projection-reintrojection. They relate this process to “analogizing” which “bridg[es] the gap between the observer and the contents of a work of art (p. 290).

A projection-reintrojection cycle with the music program emerged from the analysis. It can be described as follows: As the participant listened to the unfolding music program, a specific characteristic, quality, or image is experienced in the music. Although this characteristic is felt to have originated from within the music program, in reality it had been projected onto the music

from the internal world. The projected characteristic (as yet unrecognized as such) is heard and identified as desirable and is then introjected (taken in and accepted) into the self. This results in the acceptance, or the re-introjection, of the characteristic that had previously been inaccessible. Furthermore, once this characteristic is reintrojected, the participant feels transformed – it is a newly emerged self-experience. Nancy’s GIM session illustrates this cycle in Table 6.3. Before the session Nancy was not confident in herself. But as she listened to the Mozart *Laudate Dominum* vocal solo, she heard the singing as confident. Although she felt the confidence emanating from the music, in reality it was an inaccessible part of her internal world that had been projected onto the vocal soloist. The solo was heard as beautiful and confident and soon after this, Nancy experienced herself singing confidently. As she continued to sing, the feelings of confidence grew, and at the end of the music program she felt completely confident. In the postlude, Nancy felt transformed and acknowledged the desirability of this characteristic, saying “This is the ‘me’ I want to be always.” In addition, this new self-experience was felt to be her “true” self.

**Table 6.3: Nancy projection-reintrojection cycle**

Timeline	Steps in the Cycle	Nancy’s Cycle
Before music	Initial self-experience in which the characteristic is inaccessible, rejected, or unrecognized	Nancy has fears, self-doubt, and is without access to her confidence
Projection	Characteristic is experienced in the music	Vocal solo sounds confident to her
Identification	Music/characteristic is heard as desirable	Music is beautiful, confidence is desirable to her, she identifies with (becomes) the singer
Introjection	Characteristic is taken in and accepted into the self	Nancy sings and feels the confidence growing within herself
After music	New self-experience/state of consciousness	Nancy has self-confidence

The projection-reintrojection cycle of each participant is outlined and all six cycles are summarized in Table 6.4. Bill was the only participant who did not complete the cycle and Michelle was the only participant who did not complete all of the steps of the cycle until the postlude. All four of the music therapist participants – Hillary, John, Deval, and Nancy – completed the whole projection-reintrojection cycle during the music program. Consequently, only these four participants concluded the session with a new self-experience (a new state of consciousness that included the reintrojected characteristic).

**Bill**

Bill accomplished the first step of the cycle during the music. He projected two characteristics onto the music: being overweight and his tension about fatherhood. These were projected into three images: a cruise ship, an elephant, and a man taking a baby. During the music program he did not identify with these images nor did he reintroject them. But, in the postlude, he was able to identify with them. Because Bill did not complete the final step in the cycle, he did not gain a new self-experience.

**Michelle**

Michelle projected onto the music her characteristic of indecisiveness. Whereas she had always judged her indecisiveness as negative and rejected it, during the music she experienced, and accepted, an indecisive female dancer in an indecisive relationship with a male dancer. But Michelle did not reintroject her indecisiveness as evidenced by the fact that throughout the music program she felt the story from an impersonal stance. However, through a discussion in the postlude, Michelle identified with, and reintrojected, this characteristic as her own. Further, the reintrojected indecisiveness came with an insight. Since the *ballerina* in her imagery was indecisive without anxiety she realized that *she* could be indecisive without anxiety in her everyday life. Because Michelle's cycle was not completed during the music program, she did not gain a new self experience; but through its completion in the postlude, she gained a new cognitive insight.

**Hillary**

Hillary projected qualities of strength and stillness onto the music, as well as the message to accept herself more fully. When she reintrojected these qualities and the message of self-acceptance, she experienced a transformation into a state of strength and stillness that she felt as her true nature. This new self experience was a responsive solution to her presenting issue of being too busy and feeling distanced from herself since her miscarriage.

**John**

John projected onto the music the message to accept and enjoy the turmoil and pleasures of his life. When he reintrojected and accepted this message, he experienced a transformation into a state of being fully alive and present in the here and now. This new state of consciousness was a responsive solution to his presenting issue of being too driven in his daily life.

**Deval**

Deval projected a feeling of perfectly balanced security and freedom onto the music, as well as a sense of deep spiritual connection within himself and with his deceased relatives. When he reintrojected these feelings, he experienced a (peak, spiritual) transformation into a state of connectedness which was felt as his spiritual core. This new state of consciousness was a responsive solution to his need for support in regard his imminent retirement from teaching and to the mourning of his mother's death (as the session took place on the anniversary of his mother's death).

### **Nancy**

Nancy projected the qualities of clarity, confidence, and a slow pace onto the music. When she reintrojected them, she experienced a (spiritual) transformation into a state of clarity and confidence that was felt as her true "essence." This new state of consciousness was a responsive solution to her presenting anxiety, fear, and impatience about her current life and its slowed down pace.

### **Summary**

From these six participants, it can be seen that 1) the completion of the projection-reintrojection cycle during the music program resulted in a new state of consciousness, 2) the completion of the projection-reintrojection cycle by the postlude resulted in psychological insight, and 3) an incomplete projection-reintrojection cycle resulted in an identification of projected psychological issues. These results can be linked to levels of psychotherapy – supportive, re-educative, and reconstructive (Wheeler, 1983; Summer, 2002, 2006). The four participants who completed the cycle during the music program had reconstructive, transformative sessions and the two participants who did not had re-educative session.

**Table 6.4: Participants' projection-reintrojection cycle**

<b>Partici-Pant</b>	<b>Projected characteristics</b>	<b>Project-ion</b>	<b>Reintro-jection</b>	<b>Result</b>
Bill	Being overweight, fatherhood	Music	---	Identified issues
Michelle	Indecisiveness	Music	Postlude	Insight
Hillary	Strength, stillness, self-acceptance	Music	Music	Transformation
John	Fully present, acceptance of turmoil	Music	Music	Transformation
Deval	Security and freedom; spiritual connection	Music	Music	Transformation
Nancy	Clarity, confidence, slowed pace of life	Music	Music	Transformation

### 6.2.3 Synthesis of music process and imagery cycle

Each of the four music therapists' relational capacities towards the music deepened, each accomplished the projection-reintrojection cycle, and each experienced a transformation of consciousness. This yielded a reconstructive session for these participants. It was felt to be a connection with internal positive resources and a transformed sense of self. The two non-music therapists did not experience an increased relational capacity towards the music and they did not accomplish the projection-reintrojection cycle during the GIM program. For these participants, there was no transformation of consciousness, but it yielded a re-educative session.

To summarize, in these six participants' sessions when there was a deepening in the music relation, there was a concomitant transformation in the self relation through the projection-reintrojection cycle.

1. When the music relation deepened *during* the program, it resulted in a transformative, transpersonal session in which the participant gained a new state of consciousness, a new self-experience through a projection-reintrojection cycle. This occurred in Hillary, John, Nancy, and Deval's sessions.
2. When the music relation deepened *after* the program, it resulted in a re-educative session in which the participant gained therapeutic insight. This occurred in Michelle's session.
3. When the music relation *did not* deepen, it resulted in a re-educative session in which the participant identified internal issues. This occurred in Bill's session.

The two participants who *did not* experience an increased relational capacity towards the music during the GIM program also *did not* complete the projection-reintrojection cycle, nor did they gain a new self-experience in their session. Four participants who *did* experience an increased relational capacity towards the music during the GIM program also *did* complete the projection-reintrojection cycle and *did* gain a new self-experience in their session. This may give some evidence of the interdependent nature of these two processes in music-centered GIM: the music relation and the self relation. In other words, it appears that in MCGIM, the more deeply the client relates to the music, the more s/he is able to complete the projection-reintrojection cycle, and the more deeply transformative the session becomes.

## Chapter 7: Analysis of modifications

During the analysis of the data, a research question emerged: *What is the difference between music-centered GIM and the Bonny Method of GIM?* According to Bruscia (2002a), when a GIM Fellow changes the essential characteristics of BMGIM, the new method falls under the generic category of GIM. Music-centered GIM is considered a GIM method that modifies two essential characteristics of BMGIM: 1) the music program consists of repeated pieces of classical music (one or more pieces within the program are repeated at least once) and 2) the therapist utilizes primarily music-centered verbal guiding interventions. How then do these two modifications work in music-centered GIM? In order to examine how they were used in this study and to gain a deeper understanding of the therapeutic intentions in their use, I undertook an analysis of each repeated music decision and all music-centered guiding interventions used in the six GIM sessions. This chapter reiterates the study's original definition of the modification, presents the steps of data analysis, describes the results and in its conclusion, the research question is answered.

### 7.1. Repeated music

#### 7.1.1. Method of analysis

At the outset of this study, music-centered GIM programs were defined as follows (see sections 2.2 and 4.7): the program is characterized by the repetition of one or more pieces of classical music, repeated one or more times. This design is based on the concept of “holding” a client in one piece of music, rather than the stimulation of many pieces of music. In BMGIM, the client listens to a program with a pre-designed contour. In music-centered GIM the program is spontaneously linked and the client experiences the same musical material over and over again. The multiple hearings of one piece of music are intended to give the client time to listen more closely to the aesthetic complexities inherent within the classical music selection. Repetition creates the opportunity for a deeper, more intimate, and more differentiated relationship with the given piece of music.

The data about each participant's music program was collected from the GIM session transcript and from the material in the four levels of the vertical analysis (see chapter 4 for Levels One – Four VA). The data was analyzed to discover the *use* and *intent* of the music repetitions. I asked the question “Why did I make the choice to repeat this piece of music?” and took the following steps to further understand the decision to repeat the music:



1. Examination of each instance of repeated music alongside a description of the participant's music relation and imagery prior to, and following, the repetition
2. Identification of the elements of the participant's experience that seemed relevant to the decision making process. Unless otherwise noted, these are elements that were identified by the participant either in the session or in the interview (see Table 7.1 for a summary).
3. Creation of a statement of therapeutic intent for each repetition
4. Comparison of these statements produced types of music repetitions
5. Summary of the qualitative data from the six participant interview questions: *Were you aware of the repetition of the music during your session? How did you experience it?* to provide a client perspective on repeated music
6. Synthesis of all data to yield a summary conclusion

The following section summarizes the occurrences of repeated music and reports the results of the repetition analysis for each of the six participants.

### 7.1. 2. Results

There were seven instances of repeated music. Table 7.1 summarizes the circumstances surrounding the decision for these seven repetitions. It is interesting to note that Deval's music program had two instances of repeated music; all other participants had one. Hillary's music program had the highest number of repetitions of one piece of music.

**Table 7.1: Use of repeated music**

Participant	Repetition occurred			Decision to repeat		
	During	When	# rep	Client Aware	Easy vs Difficult	Therapist vs client
Hillary	Copland <i>Corral Nocturne</i>	20 min	1 <sup>st</sup>	No	Easy	Therapist
			2 <sup>nd</sup>	No	Easy	Therapist
			3 <sup>rd</sup>	Yes	Easy	Client
John	Rodrigo <i>Concierto de Aranjuez</i>	10 min	1 <sup>st</sup>	Yes	Difficult	Therapist
Nancy	Mozart <i>Laudate Dominum</i>	23 min	1 <sup>st</sup>	No	Easy	Therapist
			2 <sup>nd</sup>	Yes	Easy	Client
Deval	Beethoven <i>Violin Concerto, mvt 2</i>	16 min	1 <sup>st</sup>	No	Easy	Therapist
	Canteloube <i>Brezairola</i>	33 min	1 <sup>st</sup>	No	Easy	Therapist
Michelle	Beethoven <i>Piano Concerto #5, mvt 2</i>	7 min	2 <sup>nd</sup>	Yes	Easy	Client
			3 <sup>rd</sup>	No	Easy	Therapist
				Yes		
Bill	Brahms <i>Symphony 3, mvt 3</i>	18 min	1 <sup>st</sup>	No	Difficult	Therapist

**Hillary**

Hillary’s music program is reported in Table 7.2. Twenty minutes into her music program during Copland’s *Corral Nocturne*, Hillary had a very strong relation towards the music. She felt the music as both flowing into her head and as a trusted authority figure talking to her. She began to introject a feeling of strength into her body as the music was flowing into her head. Four elements of her experience seem relevant for the repeated music decision: 1) the strength she was introjecting was a positive resource, 2) the positive resource was a solution for her identified issues, 3) the introjection of the feeling of strength was occurring as a body experience, and 4) the introjection had only begun (she felt the strength only in her head).

The decision to repeat the Copland was made twice in a row. The intent of the repeated music appears to be to support and extend the process of introjecting a feeling of strength from the music. The repetition held Hillary in this process, and provided the time and focus for the introjection to proceed. At the end of the third hearing I asked Hillary if she wanted another repetition and she did. Therefore the Copland was repeated a fourth time. This served to complete the introjection and helped Hillary return to a more grounded state of consciousness.

**Table 7.2: Hillary music program**

Piece	Times Heard	Duration	Total Duration
Faure <i>Pavane</i>	1	7:44	7:44
Debussy <i>String Quartet, Andantino</i>	1	7:41	7:41
Copland <i>Rodeo, Corral Nocturne</i>	4	3:59	15:56
Total Music Program			31:21

In the interview Hillary reported on several aspects of the Copland repetitions. She felt the repetitions had given her time to fully experience the feeling of strength and the message of acceptance from the music. She reported that the final repetition put her in a more cognitive mode to end the music experience. In the follow-up telephone interview, she reported that the repetition music had given her a new attitude towards listening to music in general and specifically towards strong music in GIM. She felt less afraid and more curious, "I can go to it [music] with a feeling of curiosity and not be afraid of what the music will show me."

**John**

John’s music program is reported in Table 7.3. During the first hearing of the Rodrigo concerto movement, John had experienced the music as dialogues that became united in the end.

His imagery included episodes of different people in dialogue that became unified and finally gave him the message, “Now is the moment!” At the end, a small bird flew from his hand and he had a sense of satisfaction and freedom. The Rodrigo movement had lasted only 10 ½ minutes, yet John’s experience had come to a natural conclusion and I was unsure about how to proceed with the music program. I felt the need to gather additional information to help me decide whether to repeat the Rodrigo movement or choose a second piece of music, so I asked John to describe his state.

Two elements of his experience seem relevant for the repeated music decision: 1) As he described his state to me, he reflected on the image of the father and son, speaking in the third person and 2) he had little experience as a GIM client.

Since John was experiencing the music externally and was an inexperienced GIM client, the intent of the Rodrigo repetition appears to be to deepen John’s relation to the music. With the repetition, John experienced almost the same imagery process as the first hearing. But whereas in the first hearing the music was external to him, in the second hearing the music became internal.

Once I decided to repeat the Rodrigo movement, I let John know that he would hear it again, and indicated that he should open himself to see how it would sound the second time.

**Table 7.3: John music program**

Piece	Times Heard	Duration	Total Duration
Rodrigo <i>Concierto de Aranjuez, mvt 2</i>	2	10:31	21:02
Total Music Program			21:02

During the interview John reflected on the Rodrigo repetition, stating, “I really listen[ed] to the piece as if it [was] being created in the moment – as if it [was] unfolding for the first time. I let go of knowing the piece just to live in each tone and each unfolding direction. I think you can approach something that is pre-composed with that kind of a newness, that kind of a spontaneous approach to it...to really open yourself to living in it’s unfolding. Music is a process; it’s not a static thing. It is something that is constantly changing, unfolding, expanding, contracting. So even though it is pre-composed it still has those elements.” It is interesting to note that in the interview, when I played excerpts from the piece for John to reflect back upon the experience he had had in the session, his tendency was to listen to the piece completely

afresh again rather than recall the hearings from the GIM session. He said, “Every time I listen it’s going to be different.”

**Nancy**

Nancy’s music program is reported in Table 7.4. During the Mozart piece, twenty three minutes into her music program, Nancy had a very strong relation towards the music. She had identified with and became the vocal soloist, and the chorus was supporting her singing. As she sang, she began to introject the feeling of confidence into her body. She was also simultaneously introjecting the feeling of support from the chorus. Four elements of her experience seem relevant for the repeated music decision: 1) the feelings of confidence and support were positive resources for her; 2) these resources were solutions to her identified issues; 3) the introjection of the feelings was occurring as a body experience; and 4) the introjection was felt as a spiritual experience.

The intent of the repeated Mozart movement appears to be to support and extend the process of introjecting the feelings of confidence and support from the music. The repetition held Nancy in this process and provided time and focus for the introjection to deepen. At the end of the second hearing I asked Nancy if she wanted another repetition and she did. The movement was repeated a third time. This served to complete the introjection and helped her return to a more grounded state of consciousness. The intent of this repetition was very similar to that of Hillary’s.

**Table 7.4: Nancy music program**

Piece	Times Heard	Duration	Total Duration
Wagner <i>Siegfried Idyll</i>	1	18:17	18:17
Mozart <i>Vesperae Solomnes, Laudate Dominum</i>	3	5:21	16:03
Total Music Program			34:20

In the interview Nancy reacted strongly to the Mozart repetitions. She indicated that, before the session, she had been skeptical about the idea of repeated music in GIM. In addition, she was quite surprised that she was unable to cognitively recognize the piece of music that had been repeated despite the fact that she was so completely focused on the music and was also familiar with the piece from the GIM repertoire. She explained that this was very significant to her because in her personal GIM sessions, prior to this one, she had always been distracted by

familiar pieces. This was the first time she could recall not recognizing a familiar piece in a GIM session, and was also the first time she had not been distracted by the familiarity of a known piece. Discussing two repetitions in her program, she stated: “The more I heard it, the deeper it got. The deeper it got, the more outside of me I got,” . . . “I could hear it more, I could take it in more,” . . . “Each time I got something deeper from it.”

### **Deval**

Deval’s music program is reported in Table 7.5. Hel was the only participant with two repeated pieces. The end of the second piece in Deval’s program, the Beethoven *Violin Concerto movement two*, came after sixteen minutes. He had experienced the Beethoven movement on many levels; as ancient, feeling very young (like a boy), as the violin soloist (he is a violinist), and with a feeling of riding the music. In addition, he was anticipating the strong transitional musical material before the next movement. In his imagery, he was on a slow and steady upward journey, feeling a perfect balance of holding and freedom.

Four elements of Deval’s experience seem relevant for the repeated music decision: 1) the feeling of simultaneous holding and freedom was a positive resource for him; 2) this resource was a solution to his identified issues; and 3) his feelings were experienced as spiritual. The intent of the repeated Beethoven movement appears to be to support and extend the spiritual process at hand. The repetition held Deval in this process and provided the time and focus for the spiritual journey to deepen.

Later in the music program, during the Canteloube song, the solo voice entered Deval’s heart like silver liquid and he began to “land” from his journey. Four elements of his experience in the Canteloube seem relevant for the repeated music decision: 1) he was introjecting something positive, 2) it was a bodily experience, 3) it was a spiritual experience, 4) it was a change from the intensity of the peak experience and seemed to be a way to close the music experience, and 5) the introjection had only begun (entering only his heart). The intent of the repeated Canteloube song appears to be to support and extend the process of introjecting the comforting liquid that cleansed and healed his body. The repetition held Deval in this process and provided the time and focus for the introjection to deepen. At the end of the second hearing I asked Deval if he wanted another repetition and he did. The movement was repeated a third time. This served to complete the introjection and helped him return to a more grounded state of

consciousness. The intent of the Canteloube repetition was very similar to Hillary and Nancy's repetitions.

**Table 7.5: Deval music program**

Piece	Times Heard	Duration	Total Duration
Bach <i>Prelude in Eb minor</i>	1	5:13	5:13
Beethoven <i>Violin Concerto, mvt 2</i>	2	11:07	22:14
Mascagni <i>Cavalleria Rusticana, Regina Coeli</i>	1	6:20	6:20
Canteloube <i>Songs of the Auvergne, Brezairola</i>	3	3:38	10:54
Total			44:41

In the interview Deval responded very strongly to the discussion of repeated music. He was quite aware of the Canteloube repetition and that it had served to end the music program. He said that each repetition felt like a different kind of “coming back” from the intensity of the session. It allowed him to “prolong the return. It helped because it made it gentler.” However, he had been unaware of the Beethoven repetition and this was shocking to him since he knew the piece so well. He spent considerable time discussing his altered perception of the repetition. He had assumed that, after the second movement, I had played some excerpt of the third movement. He questioned how he could possibly have mistaken the repeated second movement of the Beethoven *Violin Concerto* for the third movement. How could he not recognize the second movement as the second movement; the same music he had just heard? He answered this question for himself saying, “Truly played music is never the same; truly listened to music is never the same” by which he meant that after the first playing of the movement “[he was] not the same person from having interacted with that music.” And since *he* was different after its first playing, he heard *the piece* differently during its second repetition. He found a relevant psychological metaphor in this: if you feel stuck and depressed, you should listen to yourself. If you are truly listening to yourself, you will always hear something new and you would never feel stuck or give up on yourself.

In regard the general consideration of the repeated pieces, he said “Both times it gave me a welcome chance to extend the work; to go even further with it; it was a welcome opportunity.” The Beethoven repetition gave him “a chance to continue the deep place I was going.” He felt, “Oh, there [is] so much happening, I’d like to keep going.”

**Michelle**

Michelle's music program is reported in Table 7.6. During the first hearing of the Beethoven concerto movement, Michelle related to the music, listening as if she were an audience member at a ballet trying to understand the story line. Her imagery consisted of the dancers and scenery on the stage. The Beethoven movement had been seven minutes long. Two elements of her experience seem relevant for the repeated music decision: 1) Her music relation was distanced – it was cognitive and impersonal, and 2) she was a first-time GIM client. Therefore, the intent of the Beethoven repetition appears to be to the deepening of her music relation. The first repetition was successful because it produced the same imagery, yet with richer and fuller details of a story. I repeated the piece a third time. During this third hearing she again developed a fuller and deeper experience of the visual imagery of the ballet. After the third hearing I decided to explore the potential of another piece rather than repeat it a fourth time. The intent of Michelle's repetition was very similar to John's.

**Table 7.6: Michelle music program**

Piece	Times Heard	Duration	Total Duration
Beethoven <i>Piano Concerto #5, mvt 2</i>	3	6:54	20:42
Schumann <i>Fünf Stücke im Volkston, Langsam</i>	1	4:44	4:44
Total			25:22

In the interview Michelle reported that she was aware of the repetitions. She said, "I remember thinking, hmmm, is this the only thing I'm going to hear or will there be other things?" She did not have any other comments in regard the repetitions. However, in the interview I learned that her listening stance was a literal re-enactment of her childhood experiences at the ballet.

### **Bill**

Bill's music program is reported in Table 7.7. The repetition within Bill's music program occurred with the third piece of music after eighteen minutes of music. Throughout the music program, my choices of music seemed too strong for Bill; in fact, he became anxious in response to the music, and opened his eyes to stop the process. When I chose the third piece (Brahms *Third Symphony, third movement*), my goal was to re-engage Bill in a more manageable experience. During this piece his relation to the music was a negative one: he felt completely bored and was not attentive to the music. He had two fleeting images of dancers on a cruise ship, but his main image was that he was at a concert he did not like, where the audience,

including him, was listening compliantly. Two elements of his experience seem relevant for the repeated music decision: 1) His music relation was distanced – it was inattentive, impersonal, and negative, and 2) he was a first-time GIM client. Therefore, the intent of the Brahms repetition appears to be to create a closer relation to the music. The strategy worked somewhat – at the end of the second hearing of the Brahms, Bill had an image of an elephant, the most significant experience of the session to him. However, during the Brahms repetition, Bill felt the music as a wave that was trying to reach him, but no matter how often the wave swelled up, it could not. The intent of Bill’s repetition was very similar to John and Michelle’s.

During the second hearing of the Brahms, Bill’s experience of a wave trying to reach him, but failing was clearly an expression of how he experienced the music, and the dynamics occurring between us: I kept trying to reach him, but each choice failed. Thus, the wave is analogous to the inadequacy of the music program and the therapeutic relationship to reach him in this session. In retrospect, an approach more similar to Michelle’s would have benefitted Bill. For example, in Michelle’s session I played several pieces before the induction to assess her responses to classical music, and I repeated the first piece of music on the program to deepen the music relation from the very beginning. I believe that the first piece on Bill’s program, Respighi *Gianicolo*, was too stimulating. In retrospect, the Faure *Pavane* (the final piece from his program) would have been a better selection to begin the program. .

**Table 7.7: Bill music program**

Piece	Times Heard	Duration	Total Duration
Respighi <i>Pines of Rome, Gianicolo</i>	1	6:25	6:25
Strauss <i>Death and Transfiguration (excerpt)</i>	1	6:14	6:14
Brahms <i>Symphony #3, mvt 3</i>	2	5:36	11:12
Debussy <i>Dances Sacred and Profane</i>	1	10:31	10:31
Faure <i>Pavane</i>	1	7:54	7:54
Total			42:16

During the interview Bill reported that he was not aware of the repetition and did not feel it had made the experience any better or worse. He spoke openly about his dislike of the music and I learned that his distant listening response may have been, in part, related to his preferences for live, improvised music.

### 7.1.3. Conclusion



An analysis of the seven music repetitions used in this study revealed three different types related to therapeutic use and intent: *music-oriented*, *transformation-oriented*, and *introjection-oriented repetitions*. The therapeutic intention of each *music-oriented repetition* was to deepen the relationship with the music, and it occurred three times. The first two occurrences were during John and Michelle's music program, and in both cases the repetition occurred with the first piece of music. Since repetition creates a feeling of trust in the music, it allows for deeper listening, and for relating more fully or more directly to the music. The point of the *music-oriented repetition* of the first piece was to establish deeper listening right from the beginning of the program. This can be especially necessary in the case of inexperienced GIM travelers who need to be guided, or "taught," how to listen in a deeply receptive way. The third *music-oriented repetition* occurred in Bill's music program. This repetition had the same goal – to guide Bill towards deeper listening – but overall the music program failed to deepen his listening.

The second type, a *transformation-oriented repetition*, had the goal to deepen and support an imagery process when it was moving towards a transformation. Rather than move the process forward with a different piece of music, the intent was to hold the process – allowing time for the completion of the imagery as it emerged – within the same piece of music. There was only one *transformation-oriented repetition*; the (first) repetition in Deval's music program.

The third type, an *introjection-oriented repetition*, was used to see a process of introjection through to the end. The three *introjection-oriented repetitions* had the goal to deepen and support an introjection process, and subsequently to facilitate an end for the imagery experience. *Introjection-oriented repetitions* occurred during Hillary, Nancy, and Deval's (second repetition) music program. Each of these processes of introjection were experienced as body sensations (music entering the body), and each introjection took place after a psychological or spiritual transformation had occurred. Also, in each case the *introjection-oriented repetition* ended the imagery process.

This analysis revealed a general pattern to the repeating of music in music-centered GIM. Since establishing a receptive attitude is usually necessary at the beginning of the music program, transformation usually occurs in the middle of the program, and introjections usually occur towards the end of the program, the use of these three types of repetitions may be considered in this general linear order – *music-oriented* at the beginning, *transformation-oriented*

in the middle, and *introjection-oriented* at the end – although their occurrence may be during any part of a music program.

## 7.2 Music-centered guiding interventions

### 7.2.1 Method of analysis

In a BMGIM session, verbal guiding interventions are nondirective, non-analytical, and they are broad based in that the interventions focus on any and all elements of the client's experience including imagery, thoughts, body sensations, and experience of the music. Whereas the BMGIM guiding strategy does not favor an emphasis on any one aspect of the client's experience, music-centered GIM guiding is directive, focusing essentially on the client's experience of the music. In BMGIM, when an image is evoked by the music the therapist most often uses an imagery-centered intervention. But in music-centered GIM, rather than using an imagery-centered intervention to direct the client's attention to the images that are emerging, the client's attention is directed back towards the music that had evoked the image. At the outset of this study, music-centered guiding interventions were defined as *any verbal interventions during the music listening portion of a GIM session that specifically refer to the music*. The basic intent of the guiding intervention was to establish the music as the focus of attention in order to further develop the participant's relationship with the music, not the imagery. This study did not require every verbal intervention to be a music-centered one, only that, whenever possible, music-centered interventions would take priority over imagery-centered interventions. The data on each participant included all verbal guiding interventions collected from the music portion of the GIM session transcript. The goal of the analysis was to gain a greater understanding of the *use* and *intent* of music-centered guiding in music-centered GIM.

In order to understand how music-centered guiding was used, an analysis calculated the following for each of the six participant sessions for all verbal guiding interventions

1. Totals for all verbal guiding interventions
2. Comparison of intervention totals to program length
3. Totals and ranges for music-centered versus imagery-centered interventions
4. Comparison of total interventions and mean differences between music therapists and non-music therapists

The following steps were taken with the 123 music-centered guiding interventions:

5. Examination of each music-centered guiding intervention alongside a description of the imagery, prior to and following the intervention
6. Creation of a statement of therapeutic intent for each music-centered intervention
7. Comparison of these statements to produce categories and sub-categories
8. Calculation of usage of categories for each participant (totals, percentages)
9. Summary of the qualitative data from the six participant interview questions: *Were you aware of the use of music-centered guiding interventions during your session? How did you experience these?* to provide a client perspective.
10. Summary of the qualitative data from two focus group questions: *How did you experience music-centered guiding as a therapist? As a client?* to provide additional client and therapist perspectives.<sup>1</sup>
11. Synthesis of all data to yield a summary conclusion

### 7.2.2. Results

#### Verbal guiding interventions

A summary of the verbal guiding interventions is given in Table 7.8. The average number of total interventions was forty, with a very wide range between the lowest and highest number (John with twenty two, Bill with seventy five). The length of the music program for each of the six participants in this study, included in Table 7.8 also shows wide variability. The average program length was 33 ½ minutes with a wide range between twenty one minutes (John) and forty four minutes (Deval). This general summary shows that there is no correlation between interventions and program length. For example, Michelle had the second shortest program and the second highest number of interventions. It also reveals that the total verbal interventions of Michelle and Bill are very high.

---

<sup>1</sup> Two impromptu focus groups were conducted at seminars on music-centered GIM led by myself and Lars Ole Bonde. The first was at the Eighth European Guided Imagery and Music Conference in Fevik, Norway on September 15-16, 2008 with an international group of twenty eight GIM Fellows and trainees. The second was at a Danish Society for GIM seminar in Aalborg, Denmark on November 2, 2008 with a group of Danes: eighteen GIM trainees and four GIM Fellows. After receiving instructions about music-centered guiding, each group member participated in two short GIM dyads, once as a client and once as a therapist. An open discussion about music-centered guiding was held and comments were collected.

**Table 7.8: Guiding interventions and program length**

<b>Participants</b>	<b>Hillary</b>	<b>John</b>	<b>Nancy</b>	<b>Deval</b>	<b>Michelle</b>	<b>Bill</b>
Total Interventions	34	22	27	29	54	75
Music program length	31:21	21:02	34:20	44:41	25:22	42:16

Table 7.9 shows the breakdown of the total interventions between music-centered and imagery centered interventions for each participant. It shows that Hillary, John, Nancy and Deval – the music therapy participants – had a higher percentage of music-centered interventions, whereas Michelle and Bill – the non-music therapy participants – had a higher percentage of imagery centered interventions.

**Table 7.9 Use of music-centered versus imagery-centered guiding interventions**

<b>Participants</b>	<b>Music-centered interventions</b>		<b>Imagery-centered interventions</b>	
	<b>Total</b>	<b>Percent</b>	<b>Total</b>	<b>Percent</b>
Hillary	20	59%	14	41%
John	14	64%	8	36%
Nancy	20	74%	7	26%
Deval	22	76%	7	24%
Michelle	21	39%	33	61%
Bill	26	37%	49	63%

Further comparative analyses were conducted between the two sub-groups of music therapists versus non-music therapists. Table 7.10 compares the use of music-centered versus imagery-centered guiding interventions between the two groups.

**Table 7.10: Music- versus imagery-centered guiding interventions in music therapists and non-music therapists**

<b>Type of Intervention</b>	<b>Music therapists</b>		<b>Non-music therapists</b>	
	<b>Total</b>	<b>Percent</b>	<b>Total</b>	<b>Percent</b>
Music-centered Interventions	76	68%	47	36%
Imagery-centered Interventions	36	32%	82	64%
Total Interventions	112	100%	129	100%

Table 7.11 compares the means of interventions between these two sub-groups. It is evident that there is a large difference in interventions between MT and non-MT participant

sessions. Whereas the mean for the MTs total interventions was 28, the mean for the non-MTs was 64.5. The imagery centered mean figures follow the same pattern; the mean for the MTs imagery-centered interventions was 9, the mean for the non-MTs was 41. However, the two groups' music-centered intervention means were quite similar: the mean for the MTs music-centered interventions was 19; the mean for the non-MTs was 23.5. Therefore, it can be seen that only the number of *imagery-centered* verbal interventions between groups is quite variable. The non-MTs required many more imagery-centered interventions, but not more music-centered interventions than the MTs. The simple explanation is that because this was their first session they required more guiding, more “teaching” by the therapist, about how to work with the imagery responses evoked by the music.

The similarity in the number of music-centered interventions is interesting, and not as easily explained, especially because this similarity exists even within the MT group. One would think that the GIM trainee/music therapists would require fewer music-centered interventions, but even the two GIM trainees required as many music-centered interventions as the two MTs who had moderate GIM experience. This may be explained by the fact that this type of music-focused GIM session was as new for the GIM trainees as it was for the other participants. Although the reason is not quite clear, it is evident that all six participants needed approximately the same amount of guiding, or “teaching,” to focus directly on the music.

**Table 7.11: Mean differences between music-versus imagery-centered guiding interventions in music therapists and non-music therapists**

Type of Intervention	Mean		Difference between means
	Music therapists	Non-music therapists	
Music-centered Interventions	19	23.5	4.5
Imagery-centered Interventions	9	41	32
Total Interventions	28	64.5	36.5

### Music-centered guiding interventions

An analysis of the 123 music-centered guiding interventions used in the six participant sessions sought to discover the *intent* of the music-centered guiding strategies used with these six study participants. This analysis revealed that there was one primary goal of all these

interventions: to aid in the participant's development of his/her relationship with the music; the specific intent being to improve, increase, or broaden the participant's relational capacity towards the music. Comparing the therapeutic intent for each of the music-centered guiding interventions initially produced six categories. Three of these were subsumed under one heading to yield four types or categories of interventions that represented four different approaches to reaching the goal of improving the relational capacity with the music. The categories themselves as well as examples of each, taken from the six GIM sessions, are illustrated in Table 7.12.

The first category, "listen to the music," established and increased the participants' receptivity towards the music. This category contained interventions that helped the client listen closely to the music, have an open attitude towards it, and to introject it (take it in). For example, if the participant reported: "I'm in a forest, the music is above me"; a "listening" intervention would be: "Really open and listen fully to the music there." The second category, "describe the music," helped participants describe, in general or specific terms, how the music sounded to them. The therapeutic intent of these interventions was to focus or re-focus the participant's attention on the music as fully as possible so that it could become activated as a therapeutic agent. For example, if the participant reported: "Now I'm sitting down in the middle of the forest and the music seems to be coming down through the trees, it's getting closer to me," a "describing" intervention would be: "Describe how the music sounds to you as you're sitting there." The third category, "defer to the music," guided participants to let go of their conscious decision making process in favor of allowing the music to direct the session. The intent of these interventions was to allow the music to have a maximum impact on the client and to establish it as the "primary therapist" of the session. This is necessary since the goal of GIM is to let go of conscious, ego-driven solutions to issues in favor of allowing unconscious material and solutions to emerge from the relation to the music. This implies a kind of surrender to the music—a surrender to the direction or suggestion that the participant hears within the music itself. For example, if the participant reported: "There are so many animals hiding among the trees in this forest, I'm curious about them, but the music is directing my attention above the meadow," a "deferring" intervention would be: "Can you open to what the music is suggesting?" The fourth category, "tie the imagery to the music," included interventions that activated or strengthened the link between the imagery experience that was occurring and the music that was playing. The intent of these interventions was to keep the music actively linked as the predominant part of any

imagery experience that occurred. For example, if the participant reported, “The sun and the music are shining down on me; they are warming me,” a “tying” intervention would be: “Let yourself experience that warmth in the music.”

**Table 7.12: Music-centered guiding categories**

<p><b>1) Listen to the music</b></p> <p><b>Deep Listening</b></p> <ul style="list-style-type: none"> <li>• Listen to the sound of the music.</li> <li>• Listen more to the music.</li> <li>• Let yourself really hear the music.</li> <li>• Let yourself enjoy it.</li> <li>• Let yourself experience the voices.</li> <li>• Really feel you are singing.</li> <li>• Listen so deeply to the music.</li> <li>• Listen deeply to notice everything.</li> <li>• Take your time to listen.</li> <li>• Can you really just listen to the music?</li> </ul> <p><b>Open Listening</b></p> <ul style="list-style-type: none"> <li>• Open to the music.</li> <li>• Really open.</li> <li>• Really stay open.</li> <li>• Open as much as you can.</li> <li>• Go back into the music and let yourself open.</li> </ul> <p><b>Introject the music</b></p> <ul style="list-style-type: none"> <li>• Take that message from the music into yourself.</li> <li>• Let the music in.</li> </ul>	<p><b>2) Describe the music</b></p> <ul style="list-style-type: none"> <li>• How do you experience the music?</li> <li>• How do you hear the music?</li> <li>• How does the music sound?</li> <li>• What does this music bring?</li> <li>• How is this music?</li> <li>• Say what you’re hearing now.</li> <li>• Describe more about the singing.</li> <li>• What else do you hear?</li> <li>• Describe all you can about it.</li> <li>• Notice whatever you can in the music.</li> </ul> <p><b>3) Defer to the music</b></p> <ul style="list-style-type: none"> <li>• Stay with the music.</li> <li>• Let the music bring your experience.</li> <li>• Just go into the music; see what the music suggests.</li> <li>• Open to whatever the music suggests.</li> <li>• Keep following the music.</li> <li>• Just see what happens when you experience the music.</li> <li>• <i>You</i> don’t need to decide.</li> </ul> <p><b>4) Tie the imagery to the music</b></p> <ul style="list-style-type: none"> <li>• Is that in the music now?</li> <li>• Do you experience that with the music?</li> <li>• Feel it with the music.</li> <li>• Can you hear it in the music (warmth)?</li> <li>• Do you experience the music as you are (walking)?</li> <li>• Be so fully in the image and really go into the music.</li> <li>• How do you experience the music there?</li> </ul>
---	---

A further analysis of the *use* of these categories of music-centered guiding interventions among the six participants provided evidence that the two categories: “listen” and “describe” were used the most. Each constituted 34% of the total music-centered interventions; combined

they constituted 68% of all the music-centered interventions. The third most used category was “tying imagery” (20%); the least used was “deferring” (11%). Table 7.13 illustrates this usage for each participant.

**Table 7.13: Use of music-centered guiding categories by participant**

Guiding Category	Hillary	John	Nancy	Deval	Michelle	Bill	Total	
Listen to the music	6	10	9	10	4	3	42	35%
Describe the music	8	2	5	4	7	16	42	35%
Defer to the music	1	1	4	1	6	1	14	10%
Tie imagery to the music	5	1	2	7	4	6	25	25%
Total	20	14	20	22	21	26	123	100%

However, this overview did not give a clear enough perspective of category use. When examined separately, in Table 7.14, the MT and non-MT sub-groups showed a very different profile.

**Table 7.14: Use of music-centered guiding categories: Music therapists versus non-music therapists**

Guiding category	Music therapists		Non-music therapists	
	Total	Percentage	Total	Percentage
Listen to the music	35	46%	7	15%
Describe the music	19	25%	23	49%
Defer to the music	7	9%	7	15%
Tie imagery to the music	15	15%	10	21%
Total	76	100%	47	100%

It can now be seen that the “listening” intervention accounted for almost half of the music-centered interventions for the MTs, whereas the “describing” intervention accounted for almost half of the music-centered interventions for the non-MTs. The MT group’s profile shows that the interventions were used in the following order: (From most to least) Listen, describe,



defer, and tie; whereas the non-MT's profile was ordered: Describe, tie, listen/defer. The most dramatic finding in this comparison is that the listen intervention, used the most with the MTs, was used the least with the non-MTs. To summarize, it appears that the strategy of listening and describing the music was utilized with MTs, with little need for tying the imagery to the music while the strategy for the non-MTs was to describe the music and tie it to the imagery. What follows is a description of the intervention strategies and comments on the guiding from the interview for each participant.

### **Hillary**

In regard the distribution of Hillary's twenty music-centered interventions, there were 8 describing, 6 listening, 5 tying imagery, and 1 deferring intervention. This distribution shows a heavy use of describing the music, which is probably related to Hillary's stated issue of difficulty in engaging with strong music. The describing strategy allows a client more control than, for example, deferring or listening interventions which require more openness, and often, a letting go of control. Perhaps I used the describing strategy to help her stay connected with the music in a manner that allowed her more control, rather than a deferring or listening strategy that might have exacerbated her feelings of vulnerability (especially in light of the Debussy encounter). One question arises in the examination of Hillary's distribution: If the issue of closeness and letting go to the music was a main theme in this session, as well as a stated issue in the prelude, why was there only one deferring intervention used in her session? One would think that the strategy of deferring (whose intention is to surrender to the direction or suggestions of the music) would be the most used to encourage the relational mode of surrender. Yet, there is only one deferring intervention used in the session. This could perhaps be explained as a therapeutic strategy: that because this kind of close merger was an issue for Hillary, I did not use the deferring intervention. Nevertheless, the session culminates in her surrender to the music as an "authority" and results in a positive transformation for her.

In the interview, Hillary reported that during the GIM session she was very aware of the music-centered interventions. She felt that they had created a stronger focus on the music than she had ever experienced in previous BMGIM sessions. In fact, she explained that usually in her BMGIM sessions she only focused on the music when it brought her discomfort. She said, "Being focused on the music allowed me to have more trust with the music . . . So I felt less invested in staying with an image and more open, listening to the music." She remembered

thinking several times to herself during the session, “Trust the music.” Hillary noticed that the music-centered interventions created a different experience than BMGIM in the following ways: 1) a much stronger connection with the music; 2) awareness that she had used the music to achieve a deeper self experience; and 3) more connection to feelings, less to visual imagery. In addition, as she reflected on her previous GIM sessions, she had the impression that the music-centered interventions had kept the session completely in the here and now, whereas her GIM sessions always delved into the past (usually her childhood).

### **John**

In regard the distribution of John’s fourteen music-centered interventions, there were 10 listening, 2 describing, 1 tying imagery, and 1 deferring intervention. This indicates that I was using a singular strategy with John: increasing his receptivity towards the music so he could open more and more to the aesthetic beauty and intensity of the music as it built to the end of the piece.

In the interview John reported that he had been aware of the use of music-centered interventions and reported that he felt they had supported him to go “deeply into the music,” and gave him “permission to explore or feel something.”

### **Nancy**

In regard the distribution of Nancy’s twenty music-centered interventions, there were 9 listening, 5 describing, 4 tying imagery, and 2 deferring interventions. This distribution indicates that I primarily helped Nancy to become more receptive towards the music through more open and deeper listening, and that I encouraged description of some specifics in the music to support her introjection of qualities from the music.

In the interview, Nancy reported that she had been aware of the music-centered interventions, and that they had caused her to focus more on the music than she had ever done in previous BMGIM sessions. She said, “I learned . . . that GIM sessions are really *in* the music.”

### **Deval**

In regard the distribution of Deval’s twenty two music-centered interventions, there were 10 listening, 7 tying imagery, 4 describing, and 1 deferring intervention. This indicates that my strategy was to help Deval deepen his listening while also helping him to tie his imagery experiences to the music. Deval had very vivid imagery throughout the music program, and the

tying interventions were a necessary strategy to integrate his experience of the music and the imagery together.

In the interview, Deval reported that he had been aware of the music-centered nature of the interventions. He indicated that they helped to “tether” him to the music. He heard the message of the interventions saying, “Ground yourself in the music, find the music again, find that sound, ride on that.” He reported that that his images felt as if they could have taken on a life of their own, and that without the verbal interventions to focus on the music, there would have been a more tenuous connection between the experience and the music. The music interventions encouraged him to keep going, with the feeling that the music would always be there.” He said, “You actually let the music drive the thing.”

### **Michelle**

In regard the distribution of the Michelle’s twenty one music-centered interventions, there were 7 describing, 6 deferring, 4 listening, and 4 tying imagery interventions. This indicates that my strategy was primarily a combination of describing and deferring: helping Michelle focus on how the music sounded through describing, then further, helping her to let the descriptions of the music (however the music sounded to her) suggest how the imagery (the story of the ballet) unfolded.

In the interview, Michelle reported that she had not been aware of any specifics in regard my guiding interventions, and she did not make any specific statements about their helpfulness or unhelpfulness.

### **Bill**

In regard the distribution of Bill’s twenty six music-centered interventions, there were 16 describing, 6 deferring, 3 listening, and 1 tying imagery interventions. Examining this distribution shows that more than half of his music-centered interventions involved describing the music. This is significant because it is very different from all other participants. Although I used describing as a main strategy with other participants, no other participant has describing as a singular strategy; it was always closely paired with another strategy such as listening, or tying imagery.

In the interview, when asked about the interventions, Bill reported that my questions built a bridge to let the inner images out, and without them he would have drifted off into sleep. He felt the questions, and my presence, as supportive, especially during the physical discomfort

he felt in parts of the session. However, he also explained that it was very hard for him to focus on the experience and “stay verbal.”

### **7.2.3 Summary of focus groups**

In the first focus group, most participants felt that music-centered guiding had produced less imagery and that this made an impact on the usual balance within the therapeutic triad of GIM: client, therapist, music program. Many participants felt an enhanced relationship among each (between the client and music— more intimate, central, trusting, enjoyable, as well as clarity and closeness; between the therapist and the music— more intimate, more appreciation; and between the therapist and client— stronger feeling of connection).

The following represents the comments from both focus groups regarding the enhanced therapist/music and client/music relationship in music-centered GIM. There were feelings of truly “being with” the music, being very close to, or being “fastened to” the music, trusting the music and letting it be the center of the session, being deeply inside the music or the instruments, strong support by the music and opening up at the same time, the music playing “my tune,” and dancing with music as a companion. Music-centered guiding also stimulated the following: a realization that music is so important to me, a re-evaluation of the piece of music and surprise at “how much more there is in this piece,” a challenge to be open and enjoy the music, and the feeling that it was a good experience to be allowed to be with the music instead of imagery. Some participants appreciated the focus on the music; others felt held back by it.

The focus group’s summary of the client perspective of music-centered GIM included experiences of safety, vitality, grounding, space, healing, parenting, surprise, being shaken up, being challenged, being attuned, accepting, evolving, containing, inviting, companionship, spirituality, relating, space, being expanded, being touched, meeting oneself in the music, going into the music, discovering music in the self, and possibilities. Although most participants felt some differences between music-centered GIM and BMGIM, a few participants expressed that music-centered GIM seemed basically the same as BMGIM.

In addition to these perspectives, both focus groups contributed pertinent questions and expressed difficulties in using music-centered interventions. These will be addressed in section 8.5, in the discussion section on applications of music-centered GIM in GIM training.

To summarize, the following themes emerged from the two focus groups: Music-centered guiding: 1) made it easier to stay present with the music, 2) allowed the music to do the

work with the traveler, 3) enabled deep spiritual dialogue, 4) brought peak experiences that are *in* the music, 5) helped truths to emerge that were not limited to the aesthetic, 6) brought feelings of acceptance, 7) brought out experiences that are more bodily, with body gestures (to express descriptions of the music), 8) brought more in the moment experiences (as opposed to memories), 9) brought experiences of infinite space in the aesthetic, and 10) brought a focus on the existential ambiguity contained in the music. Table 7.15 shows how these perspectives are related to the thirteen themes from the client perspectives on the music experience found in the horizontal analysis from Chapter 6.

**Table 7.15: Participant vs. focus groups' perspectives on the music experience**

Participant perspective on music	Focus group perspective on music
Music was personally related to him/her	-----
Music brought attention to an internal conflict	-----
Music brought a new, useful perspective	-----
Music regarded with respectful attention	Easier to stay present with the music
Music provided direction	Music did the work with the client
Music was dependable	-----
Music brought a receptive, transpersonal experience	Music enabled deep spiritual dialogue; brought peak experiences <i>in</i> the music
Music gave access to the true self	Music brought truths
Music gave message of self acceptance	Music brought feelings of acceptance
Music brought a bodily experience	Music brought bodily experience
Music brought a here-and-now experience	Music brought here-and-now experience
Music was aesthetically beautiful	Music brought experiences of infinite space in the aesthetic
Music brought a merging experience	-----

## Conclusion

The underlying goal of music-centered guiding interventions as derived from the six participant sessions was to establish the centrality of the music as the primary therapist for the session. The interventions established a central focus on the music, rather than any imagery that was occurring. When imagery did occur, the interventions established a link from it to the music, while keeping the music as central. There were four different types of music-centered interventions used in this study, each with a different goal. The first category, “listening to the music,” established and increased the GIM participant’s receptivity towards the music. “Describing the music,” focused or re-focused the participant’s attention onto the music so that it could be used as a therapeutic agent as fully as possible. “Deferring to the music,” allowed for

the surrender to unconscious material, and to the music as the primary therapist of the session. “Tying the imagery to the music,” kept the music actively linked as the predominant part of any imagery experience that occurred.

The two focus groups compared the BMGIM and the music-centered GIM guiding approaches, since all participants were familiar with the BMGIM approach. These GIM trainees and Fellows provided ten themes that were related to the thirteen themes from this study’s client perspective on the music experience.

### **7.3 Summary**

Music-centered GIM works through the use of repeated music and music-centered guiding to establish the music as the primary therapeutic agent of the GIM session. The use of these two modifications deepens the participant’s relational capacity towards the music, instead of deepening the participant’s relation with the images, as is accomplished in BMGIM. Whereas BMGIM transforms the participant’s state of consciousness through the development of images, music-centered GIM transforms the state of consciousness by developing the relation to the music program.

## Chapter 8: Discussion

This chapter includes discussions of the method and findings of the study. Section 8.1 gives a summary of the study. In section 8.2, the findings are related to the six pre-edited publications which were the original point of departure for the research. In section 8.3 the findings are related to the already published literature. Sections 8.4 and 8.5 present implications for GIM clinical practice and GIM training, respectively. Section 8.6 is a critical review of the method for the study, and section 8.7 draws conclusions from the study.

### 8.1 Summary of the study

This study was based on an extensive review of my publications that generated the topic of music in GIM (see chapter 1). Subsequently, as I reviewed my files of GIM transcripts to generate specific research questions about the music in GIM, I found among the sessions a music-centered adaptation of BMGIM that included an approach to guiding that was “close to the music” and an approach to music programming that involved extemporaneous linking of classical pieces interspersed with repeated hearings. Music-centered GIM had been developed in response to the needs of advanced BMGIM clients; I conceptualized it as an “advanced specialty” in GIM practice. To begin the research study, I needed to examine my pre-existing understanding of music-centered GIM more thoroughly in order to both produce a clear definition of the method and to bring to a conscious awareness as many unconscious beliefs as possible. Therefore, I undertook a computerized process of analysis, RepGrid (see chapter 3), asking myself: *How am I defining music-centered GIM?* Next, a review of the GIM literature revealed a paucity of qualitative studies on client perspectives (see chapter 2) and helped generate the purpose of the study: To better understand the moment-to-moment experiences of music-centered GIM from the client perspective. A pilot study (see chapter 4) using one GIM experienced participant was instrumental in developing the specific protocol for the GIM session, an interview guide for the semi-structured interview, and a procedure for the data analysis. Since I was seeking the client perspective, I determined that the best course of action would be to use well adult clients who could give rich verbal descriptions of their music experience. I identified three research questions for the study:

1. *How do participants experience the music portion of a music-centered GIM session?*
2. *How do participants understand the music experience in a music-centered GIM session?*
3. *How do I understand the music experience in music-centered GIM?*

I solicited six well adults with varying degrees of GIM experience. Serving as clinician/researcher, I gave each participant one music-centered GIM session and subsequently, interviewed them about the music portion of their session. The data – the six GIM sessions and six interviews – was analyzed using a hermeneutic spiral in order to answer the three research questions (see chapter 4). A four layered vertical analysis is reported in six separate case studies (see chapter 5). Then a three layered horizontal analysis synthesized the six client perspectives into thirteen themes (see chapter 6) that answered questions one and two. My own perspective on each case study from the vertical analysis was a series of narrative music episodes and a description of each participant's music transference (see chapter 5). The horizontal analysis also synthesized my perspective into a description of an interrelated music process and imagery cycle that answered question three (see chapter 6). A fourth research question emerged during the data analysis: *What is the difference between music-centered GIM and the Bonny Method of GIM?* Therefore, a systematic analysis of the GIM session transcripts, interview transcripts, and two impromptu focus groups was undertaken to gain a deeper understanding of the *use* and *therapeutic intent* of the two GIM adaptations; music repetition and music-centered guiding (see chapter 7). The analysis distinguished three types of music repetitions: music-oriented, transformation-oriented, and introjection-oriented, and four types of music-centered guiding interventions: listening to the music, describing the music, deferring to the music, and tying the imagery to the music. This closer examination of their usage and intent during the six participant GIM sessions confirmed that the underlying goal of the adaptations was to establish a more intimate relationship with the music program by allowing the music to serve as the primary therapist for the session. The interventions established a central focus on the music rather than on any imagery that was occurring. When imagery did occur, they established a link from the imagery to the music while keeping the music central. The two focus groups of GIM therapists and trainees contributed the additional perspective that music-centered interventions not only create a more intimate client-music relation, but also a more intimate feeling in the relationship between the client and the therapist, and the therapist and the music.

## **8.2 Relationship of findings to the six pre-edited publications**

Each of these articles reflects aspects of my pre-understanding about music-centered GIM. The following section compares these early formulations about music in GIM with the present study's findings.



**8.2.1 Summer, L. (1992). Music: The aesthetic elixir. *Journal of the Association for Music and Imagery*, 1(1), 43-54.**

Five themes from the client perspective are related to this article: theme 7 (music brought a receptive, transpersonal experience), theme 8 (music gave access to the true self), theme 11 (music brought a here and now experience), theme 12 (music experienced as aesthetically beautiful), and theme 13 (participant merged with the music).

**Theme 7: The music brought a receptive, transpersonal experience (a deeply profound experience beyond the personal self)**

The present study confirmed this article's contention that GIM sessions readily stimulate transpersonal experiences. Of six participants, four had a session outcome that was transpersonal, based upon client statements in the GIM session and interview. An example of this is John's transpersonal experience of the music as an archetypal grandfather that brought him existential age-old wisdom. That four of six participants had a transpersonal session was an unexpected finding, and is a noteworthy outcome considering that each participant received a solitary GIM session. It is also remarkable that of the four transpersonal experiences, two were strong spiritual experiences. In fact, one was a probable peak experience (follow-up would have been required to confirm this with absolute certainty, which was beyond the scope of this study). Neither of the two non-MT participants from this study had a transpersonal experience. Since there are too many variables that might account for this outcome, it is not possible to determine its cause. Nevertheless, this raises questions for further clinical examination: What conditions, within the client, might contribute towards transpersonal experiences? If previous GIM experience is a contributing variable, then how much GIM experience might ready a client for a music-centered GIM session?

Each of the four transpersonal GIM experiences in this study were identified as such by me during my role as clinician in the GIM session with parameters commonly used in the GIM literature. The following are defining aspects of transpersonal GIM sessions that were either directly indicated, or suggested by, the published literature: experiences of light; unusual physical sensations; strong, positive emotion; sacred spaces; special objects; supernormal presence; blessings, wisdom and profound insight; personal metamorphoses, collective experiences, unitive experiences, negative experiences, and ineffability (as collected by Abrams,

2000). Abrams also notes that in most cases in the literature, the recognition of transpersonal phenomena in GIM comes from the therapist, rather than from the client.

### **Theme 8: Music gave access to the true self**

This article argues, from a humanistic standpoint, that GIM gives clients access to positive internal resources. It contends that classical music “penetrates time, not just into our youth but into our essence and origin” (p. 48). Four of the participants felt that their experience reached their positive “essence.” For example Hillary felt the state of stillness and strength as her core self, and Nancy called the clear and confident state she had achieved “her essence.”

### **Theme 11: Music brought a here and now experience**

A prominent theme from this article is music’s ability to bring listeners fully into the present. It quotes Wagner’s opera, *Parsifal, Act I*. Parsifal says, “I hardly move, yet far I seem to have come,” to which Gurnemanz replies, “You see, my son, time changes here to space.” John’s experience of being so fully in the music that nothing else mattered was an example of this article’s contention that classical music has the ability to alter time, allowing for a fully experience of the present moment. Of the four transpersonal sessions, being in the here and now was an element in three: Hillary, John, and Nancy; it was not a theme in Deval’s session.

### **Theme 12: The music was experienced as aesthetically beautiful**

This article contends that the aesthetics of great works of classical music create the conditions for a transpersonal experience. Three of the four participants who had a transpersonal music experience confirm this. They indicated that aesthetic beauty was an important element in their music experience. However, one participant, Hillary, did not indicate aesthetic beauty as an important element in her transpersonal session and another participant, Michelle, indicated that aesthetic beauty was an important element to her and did not have a transpersonal experience.

### **Theme 13: The participant merged with the music**

One point that this article highlights is that the listener’s merging experience with the music is an essential precondition for a transpersonal experience. It characterizes merging as the strongest possible form of “matching” that occurs between the client and the music program, and as a pre-requisite for entrance into the transpersonal. However, the present study found that only three of the four transpersonal music experiences included a merger with the music. For example, Nancy merged with the vocal soloist in her spiritual, transpersonal experience in the

Mozart *Laudate Dominum*, but Deval did not merge with the music at all in his transpersonal session.

**8.2.2. Summer, L. (1994). Considering classical music for use in psychiatric music therapy. *Music Therapy Perspectives*, 12, p. 130-133.**

The article, *Considering Classical Music for Use in Psychiatric Music Therapy*, follows up on the previous article's topic of choosing music for a GIM session that matches the client. It argues that music therapists should utilize a matching technique, akin to Daniel Stern's affect attunement (Stern, 1985), rather than a simple thematic matching according to the psychiatric client's diagnosis, issue, or mood. Affect attunement consists of a cross-modal matching of the client's internal feeling state in music. Two themes from the present study are related to this article's theoretical elements: theme 1 (the participant related personally to the music) and theme 6 (the music was completely dependable).

**Theme 1: The participant related personally to the music**

The present study utilized the affect attunement matching technique, as recommended in this article, in order to allow the client to identify with the music. Affect attunement was accomplished in five participant sessions. In Bill's session I failed to select music that reflected his internal world, therefore his session is a negative case example (an example of misattunement). Despite the misattunement, Bill still actively expressed aspects of his internal state, projecting them onto the music in the form of imagery. He could also relate personally to three of the images in the postlude. However, because of the misattunement, he did not feel related to the music at any time during the GIM session. Michelle did not relate personally to the music or to her imagery until the postlude of the session when, to her surprise, she recognized the characters in her imagery as parts of her own internal world and she expressed feeling that the music was "her song." Although the four music therapists did not mention the fact that the music was related to their internal world, this was clearly assumed by each one prior to the GIM session.

Therefore, it can be concluded 1) that the four music therapy participants achieved affect attunement and felt the music they heard as related to their internal world; 2) that Michelle achieved affective attunement and felt the music related to her internal world, but only after the music program was over; and 3) that Bill, with whom I was unable to achieve affect attunement, was the only participant who felt the music as completely unrelated to his internal world.

### **Theme 6: The music was completely dependable**

The present study found that the four participants who had transpersonal music experiences identified the music as completely trustworthy. This confirms the contention that affect attunement leads to feelings of safety. Michelle did not express any ideas related to safety or trust, despite her affect attunement with the music. This may be due to the fact that the experience of therapy and of listening to music therapeutically was so new to her that it could not feel completely dependable. It may also be the case that she did feel the music as dependable, but did not verbalize it during her interview.

#### **8.2.3. Summer, L. (1995). Melding musical and psychological processes: The therapeutic musical space. *Journal of the Association for Music and Imagery*, 4, 37-48.**

In this article, the concepts of holding and stimulating are defined and exemplified through the analysis of the first movement of the Mozart *K331 Piano Sonata* (the theme and first four variations of the movement). Then, the following strategy for choosing music for GIM using the concepts of holding and stimulation is presented: First, the therapist holds the client within the familiar territory of his emotional home base with music. Next, the therapist provides stimulation in the form of musical development to encourage the client to travel into unfamiliar emotional territory. This encounter with unfamiliar musical material and its parallel unfamiliar psychological material can subsequently be incorporated back into the client's home base. The article concludes that a parallel psychological/musical process develops in GIM. A similar psychological/musical process is also presented in the earlier article, *Music: The Aesthetic Elixir* (1992) except in that version the terms "me, not-me" and "musical me, musical not-me" are used. The 1992 premise, and its reformulation in this article, identified the concept that musical and psychological processes become melded in a GIM session. The present study names and describes these processes: the first being the relational process that occurred with the music; the second being the cycle of projection-reintrojection. The findings explain how they become melded in a manner that is different from the Bonny Method. In BMGIM the main focus of the work is to deepen the imagery cycle; whereas in music-centered GIM, the main focus is to deepen the music process. In addition, the use of repeated music in the current study can be considered a form of the concept of musical holding that is proposed in this article.

**8.2.4 Summer, L. (1998). The pure music transference in guided imagery and music (GIM). In K. Bruscia (Ed.), *The dynamics of music psychotherapy* (pp. 431-460). Gilsum, NH: Barcelona Publishers.**

Although in a GIM session both the music and the therapist are open for a transference relationship that involves projection, this article advocates for the use of music as the primary transference relationship. Applying this chapter's premise to the current study, each participant's relationship with the music could be considered psychodynamically; as an early parental figure. The nature of the music relation would be similar to the early childhood relation with the parent. A metaphor is inherent in each participant's relationship with the music. The following is a hypothetical music transference for each participant derived from the analysis of their relationship with the music program in their GIM session:

1. Hillary: The music felt like a powerful, but trusted, authority that required submission [As a child her parent was very authoritarian, but trustworthy]
2. John: The music felt like a wise grandfather to whom he needed to listen very deeply [As a child his father or grandfather was felt as old and wise]
3. Nancy: When she heard the beauty in the music, she wanted to become like it [As a child, when she identified with her mother, she experienced her as beautiful and wanted to grow up to be like her]
4. Deval: The music led him in a particular direction and he needed to follow it [As a child, when his parent directed him, he felt compelled to listen and follow]
5. Michelle: The music told a story and she needed to decipher it [As a child, she related to her parent by listening carefully and cognitively, trying to understand]
6. Bill: The music was not present enough for him, yet he felt he had to listen to it, so he did so compliantly. [His parent was not present enough for him, but he still felt he had to listen. He did so, but only compliantly.]

**8.2.5 Summer, L. (2002). Group music and imagery therapy: An emergent music therapy In K. Bruscia & D. Grocke (Eds.), *Guided imagery and music: The Bonny method and beyond* (pp. 297-306). Gilsum, NH: Barcelona Publishers. Case studies in music and imagery. Published as: Summer, L., & Chong, H.J. (2006). Music and imagery techniques with an emphasis on the Bonny method of guided imagery and music. In**

**H.J. Chong (Ed.), *Music therapy: Techniques, methods, and models*. (Korean language). Seoul, Korea: Hakjisa Publishing Company.**

These two book chapters are based on the same premise that music and imagery can be practiced on any of the three levels of psychotherapy identified by Wheeler (1983): supportive, re-educative, and reconstructive. Each article identifies techniques and music at these three levels of practice. The GIM programs used in the present study were considered through the lens developed in these two chapters. The music from each program was placed in a supportive, re-educative, or reconstructive category according to the guidelines presented in these articles (see appendix B). All pieces categorized as supportive or re-educative categories were considered holding. They were characterized by minimal development, including short movements with a clearly evident ABA musical structure. Supportive pieces feature dissonances that are readily resolved whereas re-educative pieces feature extended episodes of dissonance. Pieces that were characterized by significant development sections were considered stimulative, and were categorized as reconstructive (Summer, 2002, 2006).

### **8.3 Findings in relation to previous research**

Both the client perspective and my new perspective are related to the current literature, and additional questions and ideas for further research are identified.

#### **8.3.1 Music programs in GIM**

Three aspects of music programs will be addressed and related to the present study: the relation between music, transpersonal experiences, and pivotal moments; music programming for GIM sessions at the advanced level; and categorizing the music from GIM programs.

As four of the six study participants, Hillary, John, Nancy, and Deval, had transpersonal experiences, this study confirms Bonny's (1969, 1972/2002, 1978/2002, 1993/2002) contention that classical music, in general, and GIM, in specific, stimulate transpersonal experiences. Several GIM studies have already established a causal link between specific GIM music programs and transpersonal experiences (Kasayka, 1991; Lewis, 1998-99). Although the present study does not negate these studies, it indicates that transpersonal experiences may not necessarily be causally linked to specific music programs, since each of these transpersonal sessions occurred in relation to a different, spontaneous music program.

The question of how transpersonal experiences occur with music deserves further investigation. Abrams (2002) reported on his qualitative study of transpersonal experiences in

GIM. Using a computerized program, RepGrid, he asked nine experienced GIM Fellows to describe six of their memorable GIM sessions; three that they considered to be transpersonal and three non-transpersonal. His research found ten sets of properties that distinguished the transpersonal BMGIM experience. These properties were interrelated and together they built a comprehensive, indigenous definition of transpersonal BMGIM experiences. Nine of the “features” from these properties – the features that directly refer to the music – are related to the present study’s client-music relational process. Abrams’ features are short phrases that his study participants utilized to explain how they experienced the music during their three transpersonal sessions. They are: 1) the experience extended into the music; 2) the experience expanded through the music; 3) there was total integration with the music; 4) they accommodated the music (as a power outside, and greater than, the self); 5) the music was felt to be beyond human self; 6) the depths of the music were accessed; 7) there was synergy with the music; 8) there was an embracing of the music; and 9) the music was important in the process of change.

Although Abrams comprehensively defined transpersonal sessions in BMGIM through the description of its properties and features, he did not identify how music experiences become transpersonal. Bruscia (1998a) developed a model to explain this process using Wilber's theories. He has posited that music experiences become transpersonal through a three level process that gradually builds in profundity. 1) A music experience begins as subjective (referring to personal meanings and representations), objective (concerning stimulus, organismic, and response variables involved in music), collective (relating to community ritual, identity, or archetype embodied in the music), or universal (focusing on natural, organic patterns inherent in the music). 2) The music experience then deepens beyond these four qualities so that the focus is purely upon the music itself, its aesthetic. This constitutes an aesthetic music experience. 3) Subsequently during an aesthetic music experience the listener’s consciousness may expand beyond his individual ego to become a transpersonal music experience. According to Bruscia, in music transpersonal phenomena occur either as a vehicle or as a space. When music is a transpersonal vehicle the music is a means toward a transpersonal state of consciousness and is not closely linked to the music experience itself. When music is a transpersonal space, there is a transpersonal state of consciousness which is inextricable from the music experience itself. This study’s descriptions of music episodes, which detail the steps by which each participant’s music experience is deepened, is aligned with Bruscia's concept of the deepening and evolving

nature of transpersonal music experiences. But the question of what preconditions allow these transpersonal music experiences to unfold is not addressed. For example, is the fact that GIM is a receptive method an important condition for transpersonal music experiences? Is the degree of receptivity in the client important? Is the client's specific presenting issue? Is the client's relationship with music? What about the influencing variable of the therapist? For example, what specific "instructions" and guiding interventions might tend to set the stage for a transpersonal experience? Is the genre of the music important? This opens new territory to further describe how and why transpersonal music experiences readily occur in GIM sessions.

It is also noteworthy that two of the four transpersonal experiences in this study – Nancy and Deval's – developed into spiritual experiences. Of these two spiritual experiences, one – Deval's – developed further into a (probable) peak experience. Nancy's spiritual experience emerged during the Mozart's *Laudate Dominum* (from the *Positive Affect* program) which was repeated two more times; Deval's spiritual experience emerged during the Beethoven *Violin Concerto, movement 2* (from the *Inner Odyssey* program) which was repeated one more time, and his peak experience occurred during the Mascagni *Regina Coeli* from *Cavalleria Rusticana*. As the two participants in the study who did not have transpersonal experiences were new to GIM, these results introduce new queries in regard transpersonal experiences: Who has transpersonal sessions in GIM? Are GIM experienced clients more likely to have transpersonal experiences than new GIM clients? Might there be a difference between GIM experienced clients and GIM trainees? Might GIM sessions or GIM training be conditioning towards transpersonal music experiences?

The results of this study can also be compared to Grocke's study (1999a, 1999b) that identified pivotal moments within GIM sessions. Grocke articulated distinctions between transpersonal experiences and pivotal moments; transpersonal experiences as those which are felt through the body and in which transformation occurs, whereas a pivotal moment is a precise moment of change—a point of resolution in the session that is life changing. She further clarifies that pivotal moments often come from distressing imagery. It would be interesting to study the differences between pivotal moments of change and the phenomenon described in this study; an evolving process of change that occurs throughout a music program. What is the difference between a moment of change and a process of change? Although pivotal moments were not explicitly identified in the data of this research study, is it possible that there were



unrecognized pivotal moments during the process of change. Is it possible that there are unrecognized processes of change occurring outside identified pivotal moments?

Bruscia proposed a three tiered framework for programming music for GIM sessions. This framework included an advanced level of programming with two different approaches. In the first approach, the therapist designs completely original programs of music prior to the session. In the second approach, the therapist extemporaneously links pieces together during the music imagery experience (Bruscia, 2002b). To date there are no publications that document the theory, technique, or clinical applications of either of these two advanced programming approaches. This study fills the gap regarding extemporaneously linked programs since it demonstrates how the technique was applied in six case studies. The procedure for the extemporaneously linked programs used the following steps: 1) while the client relaxes, lying on the mat, a pool of music was identified using snapshot listening on an MP3 player with headphones (ten second excerpts of approximately thirty pieces). 2) The client's "here and now" state with eyes closed was assessed immediately prior to the induction. An initial piece was selected from the pool that best matches the client's here and now state (Summer, 1992, 1994, 1995). At times, the client listened to excerpts of two or three pieces to confirm the initial choice. 3) After playing the first piece for the client, subsequent pieces for the program were then selected from the pool of music and linked together to follow the client's unfolding process. 4) A repetition of the first piece occurred when the intent was to deepen the client's music experience. 5) A repetition of subsequent pieces occurred when the intention was to hold the client in a specific imagery process as it was unfolding. 6) A final piece was chosen to provide adequate closure to the imagery experience.

Whereas pre-designed GIM programs are developed through musical or thematic linking (Bruscia, 2002), spontaneous programs are linked according to the client's unfolding imagery process. I hope the descriptions of this type of music programming will provide a foundation for teaching advanced music programming in GIM training, and for further research and theory in music programming. Primarily, I hope it will generate interest in the expansion of the GIM method to include this flexible approach to linking GIM programs.

The music from each of the GIM programs used in this study was divided into three levels: supportive, re-educative, and reconstructive (see appendix B for the categorized programs). This pre-existing categorization has been used as a teaching tool to help trainees to

better understand strategies in music selection for both group and individual GIM sessions (Summer, 2002, 2006). These levels may be aligned with Bonde's research. When, through an extensive heuristic, phenomenological, and hermeneutic method, he analyzed the pool of music used in a GIM study with cancer patients, Bonde found similar categories – supportive, challenging, and a mixed category (Bonde, 2005, 2007a, 2007b). It would be interesting to examine these two schemas in order to determine whether there are similarities in the salient features of the categories.

### **8.3.2. Relationship between music and imagery**

It was not the purpose of this research to study the influence of specific musical elements on the participants' imagery process, to examine the image potential of the study's music, or to structurally analyze the music. However, it is worthwhile to briefly examine the findings to gain some perspective about the relationship between music and imagery.

Imagery is defined as the internal imagining of situations “as if” they were actually occurring (Sarbin, 1972). Imagery includes thoughts, emotions, and sensory experiences that encompass all of the senses (visual, auditory, gustatory, olfactory tactile, kinaesthetic, and organic) (Sheehan, 1967; Johnson, 2007). In GIM sessions, imagery is considered to be an expressive container for the client's response to the music (Summer, 1998), and so there is always a relationship between the music program and the client's imagery. The intention of the music-centered guiding used in this study was to direct the client's focus away from the imagery generated by the music, in favor of an exceptionally strong focus on the music itself. Therefore, it might seem that in music-centered GIM the relationship between music and imagery is a distant one. However, no matter how much the therapist refocuses the client on the music, imagery can never be completely eliminated. The client's relationship is always expressed in images since images are natural vessels for the expression of the client's experience of the music. And so, when images do emerge in music-centered GIM, the guiding interventions strongly emphasize linking the imagery to the music as it occurs. As a result of this linking, the relationship between music and imagery in music-centered GIM may be woven even more closely than in BMGIM. One outcome of the study was the discovery of a prevalence of two types of imagery: 1) here and now imagery, and 2) kinaesthetic imagery (body sensations). In regard the prevalence of kinaesthetic imagery, this finding may be related to Aksnes & Ruud's

study (2008) which found evidence of connections between music selections and body based schemata in client metaphors with a GIM program of Norwegian classical music.

What do the study's findings say about a direct relationship between music and imagery? One participant, Deval, addressed this question from the client perspective as follows: "I'm just ever more convinced . . . [of] the structural aspects of the music and how much they do communicate beyond words and within their own framework. [They] are so freely accessible and therefore subject to so many kinds of interpretations." His perspective, that music is "freely accessible" and open to a myriad number of interpretations is verified by each participant in this study because even the immediate repetition of a piece of music during the same session did not create a repetition of the imagery experience for any of the participants. In all cases the repeated hearing brought each participant a different experience of the piece with each subsequent hearing. Even in Michelle's case when the same story was repeated it still contained different details in each hearing. What is most important is that her *experience* of the story was different each time it was reiterated. This finding is related to Stige (1999) who studied the meaning of music from the client perspective. Although not a GIM study, Stige investigated, and found significance in the fact that his client, Harold, had very different experiences of the same piece of music when it was played in different sessions.

Deval's perspective about the open nature of the music experience confirms the conclusion of Bruscia et al (2004), "It is probably better if guides remain open to the potentials and possibilities of a music program, rather than adhere to any firm predictions of its effects on either imager or the imagery" (p. 29). This perspective is also similar to Bonde's articulation of the general relation between music and imagery. His research found "the relationship of imagery sequence to music selection to be found only on a general, morphological level of the music" (2007b, p. 66).

Another perspective from Deval brought attention to the evolving interrelational process between the music and his imagery:

"The music is never the same in the sense that it's always there, because it always takes a listener. Somehow, I think the magic is not so much in the artifact itself but in the taking up – the communication aspect – of it. [There is a] loop that kind of forms within the listener and the input of the music itself as we hear it in the moment – since the music itself doesn't exist apart from us hearing it in the moment. And we're changed by it, and

it's changed by us being changed. And there is a constant loop of this going on. So what a beautiful vehicle, what a flexible and true to life [vehicle], because it's the lives of the listeners that are realized when music is being listened to."

Deval's perspective is closely related to Bunt (2000) who says, "[The] transformational aspects of GIM – changes in consciousness, images and the music itself – are seen to be all closely interrelated in a dancelike matrix. . . [there is no] simplistic one-to-one symbolic or causal correspondence between one musical gesture and the creation of an image, but in an ongoing organic and interactive way, which is itself another process of transformation" (p. 46).

His perspective is also confirmed by Garred's description of "relational dynamics" from his dialogical music therapy approach. "The working of music in music therapy, according to such a view, must be found in the interrelations, rather than in one to one causal effect.... It is in the world of relations, rather than in the predictable and manageable world of objects and things, that the workings take place. . . Music, in music therapy is not to be considered merely as an external and predictable means applied for some predefined end" (Garred, 2001, p. 8).

By integrating the finding of the present study with findings in the literature (Bruscia, 2004; Bonde, 2007b; Aksnes & Ruud, 2008; Garrad, 2001, 2006), I can now offer a revised perspective on the relation between music and imagery. In music-centered GIM, the music program stimulates a projection-reintroduction imagery cycle. This is not a unidirectional experience in which music stimulates imagery, rather it is a cycle, or a loop in which marginalized inner characteristics are projected onto the music and reintroduced back into the listener. The client's imagery is a spontaneous creation of the interrelation between the internal world of the client in the moment in which he is listening, and the unfolding of the piece of music to which the client is listening. In addition, this process must be seen within the relation of the client to the therapist since it was the therapist that chose the piece of music to which the client is listening and the therapist offers verbal interventions during the listening. If there are directional processes occurring, singling out any one directional process without the interrelational context would yield too simplistic a representation of what is occurring in the music and imagery experience. If there are specific images that seem to be related to a piece of music, the client's experience of those images may still be radically different. Therefore, separating out a causal musical element → image relation would yield too simplistic a representation of the projection-reintroduction cycle.

The present study limited its examination to the music experience and therefore its results are limited. In fact they indicate a need for further research to gain a fuller picture of the interrelationships within the therapeutic triad of music, client, and therapist as they occur in GIM. Garred advocates this consideration when he states: “There is reciprocity between all three sides, involving relational dynamics, not some or other plain directional A leading to B” (Garred, 2001, p. 8). By simultaneously examining the client/therapist, client/music, therapist/music interrelationships, perhaps future research could demonstrate a fuller, more accurate picture of what transpires in GIM sessions.

### **8.3.3. Listening perspectives**

The six study participants were directed to approach their GIM program with a concentrated yet open listening perspective. The concept of a concentrated, open focus on the music was explained to each participant in the prelude. In addition, during the induction, the following directive in regard focusing on the music was given: “There will be something in the music for you today... you can let go and really open to the music.... open and listen very deeply.” This listening perspective can be explained as an analogy: If you can listen deeply to music, you are listening deeply to yourself. This analogy is used because the listening attitude is related to the humanistic approach of GIM in which the resolution to the client’s issues is found internally, within the client, not externally or provided by the therapist.

This study confirmed that the four music therapist participants were able to use this process of deep listening as a means to listen to their internal world. Each music therapist participant produced rich descriptions of their music experience. Each participant’s music experience was separated into music episodes that showed a successively changing listening attitude and hence, a changed relational capacity towards the music. The listening attitude of each of the music therapists was deepened during the music program. This finding implies that music-centered GIM may be a helpful didactic tool for music listening when the goal is to develop a flexible listening attitude that is non-analytical or “close” to the music. For example, it might be used to train GIM guides and it might be helpful as a didactic tool in music education. Both John and Deval mentioned a tendency to approach music listening from an analytical perspective, yet both were able to let go of this perspective to deepen their music listening stance throughout the GIM program. This didactic application of music-centered GIM will be addressed in section 8.4.

The music therapists listening attitude can be contrasted to the non-MT attitude. Whereas the MTs implicitly understood the metaphorical nature of the music listening (that the characteristics, qualities, and messages they were hearing in the music were personal to them), the two non-MTs did not approach the GIM program with this listening stance. They were limited by their prior listening habits for the entirety of the GIM program. For example, Michelle experienced the whole GIM program through the listening stance she used as a child when attending the ballet. She imagined herself as an audience member at a ballet. The staged ballet did not speak directly to her and Michelle did not respond personally or take any action in response to it. Although music-centered interventions and repeated music were utilized, her listening stance remained the same. The verbal processing in the postlude of the session helped her conceive of her listening as a metaphorical process, she realized she had been “listening to herself.” Michelle's listening perspective changed and she was able to gain significant therapeutic benefit from her experience. This is an essential finding of this study, that the listening attitudes of the non-MTs were limited by their prior relationship with music whereas the listening attitudes of the MTs were flexible and deepened in successive episodes during the music program. This finding raises a need for further research to clarify whether music-centered GIM is beneficial for first-time GIM clients. The present study seems to indicate that this is worthy of further investigation, since one first-time participant, Michelle, gained the psychological mindedness needed to reap therapeutic benefit from GIM within the first session. In her final published article (2001/2002) Helen Bonny said, “One of my favorite quotes about music explains this: ‘Music jealously guards her deepest secrets. She yields them only to those who listen with full concentration. To these she extends a life-nourishing embrace’” (Lamb, 1999, p. 18 in Bonny, 2001/2002, p. 181). Perhaps GIM requires a certain listening attitude that includes not only full concentration, but also the ability for musical/psychological metaphoric thinking. Further research comparing first time GIM participants with experienced GIM participants could provide a clearer understanding of the nature of the listening perspective required to benefit from a single GIM session.

#### **8.3.4. Direct experience of music in GIM**

Garred describes direct music experiences as being akin to Daniel Stern's authentic moments of meeting between therapist and client. The early stages of the development of the present study aligned with Garred's description. The stated intention of music-centered GIM

was to create a direct relation to the music so that moments of “meeting the music” could occur more dependably and frequently, rather than accept the haphazard nature of their occurrence in BMGIM (See section 3.4). Garred describes a direct music experience in GIM:

“What may happen in a session during the process of eliciting imagery through listening to music is that there may come a point at which the music itself receives more of a full attention. A possibility presents itself of moving into the mode of relating directly to the music, rather than have it function as a stimulus primarily for eliciting imagery. . . It is listened to in its full respect as what has here been called a created image in sound. Such music-focused reception within a session may become particularly intense. And this is not about ‘content’ brought out through translation into some other medium, that is to say, verbalized as imagery, but more the *process*, the intensity of the experience” (p. 296).

John’s session illustrates a direct encounter with the music that became particularly intense. He experienced a gradually building, bodily, here and now experience of “living in every tone,” during which he felt that nothing else mattered and he experienced strong body sensations of “riding the music.”

According to Garred, these moments of directly meeting the music “bring forth a sudden shift in implicit relational knowing” (p. 110-111) and the therapeutic dyad enters a new orbit of interaction relation. Besides John’s experience, in each of the other three music therapists’ sessions, the relation to the music became more direct throughout their program. The findings of the study show that all four MTs experienced changes in implicit relational knowing of the music which would be expected from these direct encounters with the music program. However, Garred’s description of these occurrences as sudden moments is not borne out by this study. Instead, the analysis of the client experiences revealed that the four MT participants’ relation to the music changed through successively deepening “episodes,” not through a moment of direct meeting with the music. Interestingly, one participant who clearly had a sudden and surprising direct moment of encountering the music was Michelle, the non-MT participant whose music relation changed in the postlude of the GIM session when there was no music playing. Michelle had a sudden “aha” experience when she realized that the plot of the ballet had actually derived from her internal world. This is an interesting and unexpected finding of this study: that in GIM the music relation can change without the presence of the music.

Meanwhile, it can be summarized that the present study extends the literature by describing with greater clarity how direct experiences with music happen in GIM. It would be interesting to compare these two concepts – moments of meeting the music and episodes of relational change with the music – to see what properties they share. Might it be that there *were* sudden moments of meeting at the points where a new music episode began, which went unrecognized by this research study? Perhaps, upon a re-analysis of the present results, the music relation could also be recognized as a series of successively deepening moments of change, rather than as episodes.

**8.3.5. Guiding interventions**

Both Summer (1989b) and Bruscia (2003) identified five general categories of guiding interventions for use in the Bonny Method of GIM. Although each identified the categories with different titles, the function of each category is very similar. A comparison of these categories can be seen in Table 8.1.

**Table 8.1: BMGIM guiding categories: Summer versus Bruscia**

Function of the Intervention	Summer guiding categories	Bruscia guiding categories
Initiate effective dialogue	Reflect	Report
Develop the image	Investigate	Form
Expand the image	Allow	Amplify
Actively participate in/with the image	Involve	Engage
Deepen the image	Refocus on music	Deepen

Further examination of these categories shows that Bruscia and I treat imagery-centered categories similarly (in the first four categories), but music-centered interventions are treated differently by each. I allocate a separate category for music interventions (refocus on the music), whose function is to deepen the client’s image. The present study revealed four different categories of music interventions: listening to the music, describing the music, deferring to the music, and tying imagery to the music. Essentially, these four categories are an expansion, a differentiation, of the 1989 general category of “refocusing on music.”

Whereas I separate music interventions from imagery interventions, Bruscia includes music interventions within his imagery-centered categories. Four of his five categories include music interventions (the category that does not include any music interventions is the first



category, called report). For example, one of Bruscia's "deepening" music interventions is "Would you like to sing along with the music?" A comparison between examples of music interventions in Bruscia's BMGIM categories and this study's MCGIM categories revealed a lack of "active" interventions in music-centered GIM. For example, Bruscia's interventions, "would you like to sing along with the music? or "would you like to conduct the music?" suggest active engagement with the music. The music-centered interventions from this study encourage receptive engagement with the music. They encourage a surrender to the music with interventions such as "Let the music bring your experience," and "Open to whatever the music suggests" (see section 7.2 for a more complete list of interventions). This highlights what may be an important difference between BMGIM and music-centered GIM. Perhaps music-centered GIM encourages a different type of engagement with the music: a receptive form of engagement that involves surrender, whereas BMGIM encourages a more active engagement with the music. Mårtenson-Blom has linked the relational mode of surrender to transpersonal experiences (Mårtenson-Blom, 2008). Although surrender usually has a negative connotation since it is connected with defeat, she sees surrender as an essential element in the GIM experience. She sees surrender as a mode of relation that occurs in spiritual and/or transpersonal experiences when there is a positive, not negative, letting go to a higher power which may be the music experience. This link between surrendering/deferring and the transpersonal may explain the unexpectedly high prevalence of transpersonal experiences in this study's GIM sessions.

In summary, this study contributes to the GIM literature by providing new categories of music-centered guiding interventions that may be applicable for BMGIM and/or music-centered GIM, and it correlates these interventions with some of those already in the literature. It would be fruitful to investigate and correlate the intervention categories of additional BMGIM trainers to provide a more meaningful understanding of the role of guiding interventions within BMGIM sessions. Further comparison of the role of the guide in BMGIM and music-centered GIM could yield greater insights for GIM training, in general.

### **8.3.6 Client perspectives in GIM**

*Inside Music Therapy: Client Experiences* by Julie Hibben (1999) contained several descriptions of the client's perspective of the music experience in GIM, and Abbott (2004) collected descriptions of GIM music experiences from fifteen experienced GIM clients. However, these publications gleaned the client perspective from recalled GIM sessions. The

present study is the first in the literature to provide rich and immediate first person narrative descriptions of the music experience in GIM. In addition, the data provides insight into how these clients understood their music experience. But, the client perspectives in this study were limited because the method included only a single GIM session and six participants. A more in depth understanding of the client perspective could be gained in further research that includes a series of GIM sessions with one client.

#### **8.4. Implications for GIM clinical practice**

In order to examine music-centered GIM, this study used a standardized session protocol with six well adults without taking into account their clinical needs. Hopefully, the study will provide a basis for GIM Fellows to understand, and utilize, music-centered GIM within the practice of GIM, since the findings indicate that it may be effective for well adult clients.

In section 8.4.1 recommendations are made for the use of a music-centered GIM session *as an alternative to a BMGIM session*. Separate guidelines for using music-centered GIM with GIM-experienced (advanced) clients and for first-time GIM clients are suggested. Then separate recommendations are made for the use of the two techniques: music repetition and music-centered guiding *within a GIM session*. It might seem strange to separate these aspects since repeated music and music-centered guiding define music-centered GIM, but to discuss this study's findings in relation to GIM practice, it is necessary to separate the two techniques from the method itself. In fact, outside of music-centered GIM these two techniques should not be straight jacketed together in clinical practice. Section 8.4.2 gives guidelines for applying the three types of repeated music found in this study, and section 8.4.3 offers guidelines for using the four types of music-centered guiding within BMGIM sessions.

##### **8.4.1 Music-centered GIM**

The hermeneutic analysis of the client perspective and my perspective of the music experience both confirm that one music-centered GIM session was clinically valuable for the four well adults in this study who were advanced GIM clients. It confirms that music-centered GIM could be considered for use within a series of BMGIM sessions with advanced, well adult clients. Specifically, GIM practitioners could consider using music-centered GIM when, in the prelude of a session, the client is assessed as having one or more of the following clinical needs: 1) increased access to positive internal resources, 2) experiences of self-acceptance, 3) addressing bodily experiences, 4) experiences of being fully in the here and now, or 5) a

transpersonal and/or spiritual session. Music-centered GIM may also be indicated for advanced GIM clients who are assessed in the prelude of a session as needing a music experience that includes one or more of the following characteristics: 1) is deeply aesthetic, 2) feels completely dependable, 3) provides a sense of direction, 4) includes a merger experience, or 5) compels him/her to listen attentively, deeply, and receptively. Based on the findings of this study, these guidelines are suggested only for use with advanced GIM clients since the study found these themes to be prevalent within the sessions of the four GIM-experienced participants, but not in the sessions of the two GIM-inexperienced participants.

The hermeneutic analysis of the client perspective and my perspective of the two non-music therapists' music experiences confirm three circumstances in which a music-centered GIM session may be indicated for a first-time GIM client. 1) It could be considered for a first session with an inexperienced client when the GIM practitioner assesses that the client's approach to the music program might be a distanced one. (For example, as a result of prior music experiences, or as an expression of psychological resistance, or both, instead of relating personally to the music program, a first-time GIM client may take an impersonal, distanced relation. The findings from Michelle's perspective support this use of music-centered GIM.) 2) The findings from Michelle and Bill's perspective support the use of music-centered GIM when the GIM practitioner's goal for a first-time GIM client is to bring attention to a specific internal conflict. 3) The findings from Michelle's perspective support the use of MCGIM with an inexperienced client when the GIM practitioner deems insight into an internal conflict as an important goal for the first session.

The results indicate that music-centered GIM may help a beginning client to become more psychologically-minded in the postlude of the session since in the postlude of their sessions, both non-music therapists were able to identify a specific internal conflict that needed attention. One went further to develop insight in regard the conflict. These guidelines are derived from the results of this study; however, since they are minimally supported by the results, it is advised to use them cautiously until further research is conducted.

#### **8.4.2 Repeated music**

This study contributes the concept of repeated music as a new technique in music programming that can be utilized in GIM sessions. Three different kinds of music repetition – music-oriented, transformation-oriented, and introjection-oriented – were identified. Each can be considered as a strategy for use with advanced GIM clients.

The first type, *music-oriented repetition*, can be utilized at the beginning of a music program when the GIM practitioner's goal is to help the client gain a more internalized experience of the music. This application of repeated music is supported by John's session. When the slow movement of the Rodrigo *Concierto de Aranjuez* was repeated, John reported that, during the second hearing of the guitar solo, he went inside the music. With the second hearing, the music became an internal experience for him. Whether the imagery experience repeats or develops is not of concern here. Rather, the intention is to open or deepen the client's relational capacity towards the music. Music-oriented repetitions can be considered in a GIM session when the therapist recognizes that the client's relationship with the music requires deepening.

The second type, *transformation-oriented repetition*, can be used in the middle of a GIM program. In BMGIM, predesigned music programs consist of different pieces, or different movements of pieces, that are linked together. Each consecutive piece presents the client with stimulation and change in the form of new musical material. When the GIM therapist's goal is to either support the continuation of a client's imagery or hold/deepen an unfolding process, repeating a piece of music could be considered as a strategy. Whereas introducing new musical material tends to bring change, repeated musical material may deepen and support the content of transformational imagery as it emerges. This type of repetition is supported by Deval's session. When he was moving on a path towards a destination, I repeated the *second movement* of the Beethoven *Violin Concerto*, and in its second hearing, Deval's emotional involvement intensified and his imagery encounter developed into a spiritual experience.

The third type, *introjection-oriented repetition*, can be used near the end of a transpersonal GIM program. It is common for advanced GIM clients to emerge from a transpersonal experience with a strong positive feeling. In this circumstance it is clinically indicated to help the client internalize these positive feelings as fully as possible, before the conclusion of the music. In this circumstance, repeated music supports the internalization of positive feelings, especially through bodily imagery. This is supported, for example, by Nancy's session. Nancy's self-doubts underwent a transformation in the first part of her music program: the *Siegfried Idyll* by Wagner. Subsequently, in Mozart's *Laudate Dominum*, she merged with the singer, singing confidently. In order to support this positive feeling, I repeated the Mozart movement. This resulted in a process of introjection that continued through three hearings of the

piece. In the second hearing she shifted from expressing confidence as the singer to a receptive stance of taking the feeling of confidence into her body. The second hearing intensified her acceptance of the new-found feeling of confidence when she felt it had reached the very core of her being. During this hearing her imagery encounter deepened into a spiritual experience. This continued and deepened even further into the third hearing of the piece. Since it is common for clients to emerge from a transpersonal experience with a positive feeling, this repetition strategy may be especially relevant to apply in transpersonal BMGIM sessions.

These guidelines were derived from the four music therapy participant cases and therefore, they may be applicable to advanced GIM clients. However, the *music-oriented repetition* at the beginning of the program may also have an application with first-time GIM clients as indicated by Michelle's session. Hearing the *second movement* of the Beethoven *Piano Concerto #5* three times in succession held Michelle in her visual imagery of a ballet. With each repetition of the movement, the story of the ballet repeated. Each reiteration of the story brought stronger, more filled out visual images. After three hearings of the piece, the story of the pas de deux, particularly the two ballet characters, was formed with some clear visual and emotional details. Because of these detailed descriptions, in the postlude Michelle was able to recognize the similarity between the two contrasting ballet characters and two contrasting parts of her own character. Without the repeated music it is likely that Michelle's imagery would have progressed to other images or stories and Michelle may not have been able to glean personal meaning from the imagery. Without the Beethoven repetitions Michelle may have had difficulty in the postlude understanding and relating to the ballet as a metaphorical story about herself. This strategy of repeating one initial piece of music several times as the mainstay of a GIM program has clear implications for first-time GIM clients. Rather than utilize a GIM program with several different pieces of music that would tend to evoke many images, it may be more effective to focus a first-time client on one piece of repeated music.

This use of repeated music for first-time GIM clients is a different approach than, for example, utilizing *Beginners' Imagery/Beginners' Group Experience/ Explorations*, a GIM program designed to "establish rapport and foster imagery" in beginning clients (Bonny, 1980/2002, p. 64). But to date, research has not documented specific needs of first-time GIM clients. Perhaps this study has elucidated an issue for first-time GIM clients such as Michelle. There may be a tendency to approach the first GIM program as a "beginner," with a fixed, or

inflexible, listening perspective in which the music is felt as an external object that is unrelated to the internal world. In this circumstance, the results of this study identify a specific protocol: a single, repeated piece of music may engender a focused imagery experience that can more readily be applied therapeutically in the postlude. In this regard, there are already recommendations in the literature (Summer, 2002, 2006; Goldberg, 1995) that urge GIM practitioners to use music and imagery techniques (i.e., drawing during a single, repeated piece of music) as a prelude to GIM, or when GIM is contraindicated. The use of a single, repeated piece of music may also have implications for music education, as well.

#### **8.4.3 Music-centered guiding interventions**

The principal advantage of using music-centered guiding interventions is that they promote the music program to the status of primary therapist (Summer, 1998), and in doing so they realign BMGIM guiding interventions with Bonny's original notion of the centrality of the music in BMGIM (Bonny, 1989/2002). This was confirmed by comments from GIM Fellows in this study's two focus groups (see section 7.2.3). These findings are relevant to the practice of BMGIM since music-centered interventions can readily be applied within a BMGIM session. Some music-centered guiding interventions have already been identified by Bruscia (2003) and Summer (1989a). However, the current study organizes these interventions, further differentiates categories, and provides guidelines for their use.

The music-centered guiding interventions used in this study were divided into four categories. When used together, these categories established a central focus on the music, even when images were occurring. In the present study, "listening to the music" established and increased receptivity towards the music and "describing the music" focused or re-focused attention onto the music. These two categories would be indicated for use in BMGIM sessions when a client is overly imagery-centered and requires considerable guiding assistance to focus on the music program. In this study, "deferring to the music" was found to encourage a surrender to the direction of the music. This category, then, would be indicated for use in BMGIM sessions when a client resists letting go of control; when the client is actively controlling the imagery experience through conscious decisions rather than going with the suggestion or direction of the music. The category of "deferring to the music" may be key to promoting transpersonal music experiences in BMGIM since it encourages a mode of surrender (Mårtenson-Blom, 2008). The fourth category, "tying the imagery to the music" kept the music

actively linked as the predominant part of the imagery experience for participants in this study. This category is indicated for use in BMGIM sessions for a client who generates imagery, yet requires verbal support to keep the imagery linked to the music program.

Overall, these interventions can be used by GIM practitioners when the therapist finds that there is a need to establish or confirm music as the driving force of the therapy session. In addition, they may be helpful for clients who are musicians since they give guidelines for listening directly to, and describing, the music. Interventions of this type have already been recommended for use with GIM clients who were trained musicians by Keiser-Mardis (1978).

## **8.5 Implications for GIM training**

### **8.5.1 New paradigm of GIM training**

The findings of the present study will be directly applied to the creation of a new paradigm of Level III GIM training for the Anna Maria College Institute for Music and Consciousness. The institute's Level III GIM curriculum is contained within three graduate courses: Music Programming in GIM, Basic Rudiments of GIM, and Advanced Skills in GIM. This study will contribute to the curriculum design for each of these three courses.

Music Programming in GIM covers the theory and practice of the three levels of music programming: 1) the use of pre-designed GIM programs, 2) the flexible use of sequences of music from pre-designed GIM programs, and 3) the use of extemporaneous music programs from a specified pool of music selections (Bruscia, 2002). The intense reflection involved in the review of the music experiences of this study's participants, in combination with the review of each music program, brought my focus to the many steps involved in each of these levels of programming, especially developing spontaneous original music programs. In addition, repeated music will be taught as a technique within each of the three levels of programming. The new perspectives gained from this study will be used to create the curriculum and supportive written materials for this course.

Basic Rudiments of GIM will teach trainees guiding skills. I plan to expand my current curriculum on guiding skills to include the four categories of music-centered guiding. The two focus groups from this study encountered both positive and negative feelings when implementing music-centered guiding interventions. For example, many members of the focus group felt that music-centered interventions "gave the music back" to the client made them feel less controlling. But many focus group members who were used to imagery-centered interventions encountered

tension and/or clumsiness when directing the client to focus more on the music program than on the emerging imagery. This feedback will be invaluable in the preparation of the curriculum and a guiding technique handbook for this course.

In Advanced Skills in GIM, I plan to teach music-centered GIM as an adaptation to BMGIM; the findings from this study will be condensed for use in this course. In addition, I plan to use video demonstrations of GIM sessions along with written descriptions of the demonstrations as training materials for basic and advanced therapeutic skills. The analysis from this study has improved my understanding of guiding skills and music selection so that I will be better able to create and analyze training videos for use in the curriculum.

### **8.5.2 Traditional GIM training**

The findings of the present study can be applied to traditional GIM trainings in several ways. Music-centered GIM could be considered as a didactic method for GIM training. Since a single music-centered GIM session can increase an advanced listener's relational capacity towards the music, it follows that a didactic music-centered GIM could: 1) increase the flexibility of the GIM trainee's listening perspective, 2) deepen the GIM trainee's receptive attitude in music listening, and 3) provide the GIM trainee with a music-focused listening experience in order to learn each GIM program. With a guide to elicit and create a written transcript of verbal descriptions of the music program, the trainee would deepen her relationship with each of the GIM music programs.

Music-centered GIM could also be considered as a clinical method within GIM training. I would recommend the following be included as part of the Level Three training curriculum: 1) music-centered GIM as an adaptation of the Bonny Method, 2) repeated music as a strategy within BMGIM music programming, 3) music-centered interventions as a guiding strategy within BMGIM sessions, and 4) the concept of music as the primary therapist of a GIM session as an essential foundation for GIM practice.

In addition, the use of music-centered GIM, or music-centered guiding interventions within a BMGIM session, could be considered as a didactic tool in other areas of learning about music. For example, within a music therapy curriculum, music-centered GIM might help students learn about receptive music therapy techniques. Within a music education curriculum, music-centered GIM might help students learn about music listening attitudes.

### **8.6 Limits of the method**



This section provides an appraisal of the method of the study, including the participants and therapeutic setting (section 8.6.1), protocol for the GIM session (section 8.6.2), procedure for the qualitative interview and the type of data collected (section 8.6.3), the method of analysis for the qualitative investigations (section 8.6.4), and an overall evaluation of the hermeneutic approach used throughout the study (section 8.6.5).

### **8.6.1 Participants**

A major limitation of this study is that there were only six participants. Despite this limitation, I solicited participants that represented three different groups: 1) music therapists who were experienced (advanced GIM clients), 2) music therapists with moderate GIM experience, and 3) non-music therapists with no GIM experience. With more participants it would have been possible to investigate an even more divergent client perspective. For example, it would have been fruitful to gather perspectives from an additional three participants; a music therapist who had no GIM experience, a non-music therapist GIM trainee, and a non-music therapist who had prior therapeutic experience but not in GIM.

In retrospect, I believe that the amount of prior therapy experience (outside of GIM) might have been one of the most relevant characteristics to consider in regard the study participants. For example, Deval showed the most significant change in his music relation. His session was not only transpersonal and spiritual, but it developed into a peak experience. There is not adequate evidence from this study to judge, but might this result be correlated with his seven years of intensive psychoanalysis and other forms of therapy? And if so, how?

Another limitation in regard the participants was that each of the four music therapy participants were familiar with me, and my clinical and theoretical orientation. It would have been logistically very difficult to find music therapists and music therapist/GIM trainees who were completely naïve to my orientation since the music therapy and GIM professional communities are connected. In addition, members of these communities are all very familiar with one another. Although I travelled outside my locale for all four of the music therapists' sessions, I did have a prior relationship with each one. I served as co-leader in GIM seminars attended by Hillary and Bill, and I served as a GIM consultant for Nancy and in a research study as her therapist for one session. In addition, I had a distant but collegial relationship with John. In regard the ethical considerations of this study (a one-time pre-designed individual therapy

session), having prior knowledge of the participants allowed me to offer a session from which I was confident they would benefit.

However, the participants' prior knowledge of me and my orientation is a serious limitation in regard two elements of this research: the GIM session and the qualitative interview. For the GIM sessions, the prior relationship was addressed with each participant at the beginning of the session. Nonetheless it directly affected their responses to all aspects of the GIM session, especially the relation towards me and the music program I chose. The participants' prior knowledge of me meant that in the interview they were already somewhat aware of my orientation which definitely influenced their descriptions of their music experiences. This limitation is important to acknowledge.

### **8.6.2 GIM session**

The results of the present study must be seen in light of several limitations in regard the protocol for the music-centered GIM session. First, the participants had only one GIM session. Therefore, there was not a true therapeutic process related to this GIM session, and my understanding of the participants' presenting issues was limited to a short prelude. The study accommodated for this limitation, in part, by soliciting adults who were psychologically healthy enough to glean personal growth from a single therapy session. In addition, I had enough personal familiarity with the four music therapy participants to evaluate their ability to benefit from one session. Each of the non-music therapists was referred to me by a music therapist who helped me to evaluate their ability to benefit from only one session. The second limitation in regard the session protocol was that the session did not take place in a true therapeutic environment. In order to accommodate the study participants, the session was held in a place convenient for each: Nancy, Michelle, and Bill at their worksite; Hillary and John in a hotel room (during a conference). Deval's session was the only one held in my therapy room. Therefore, the atmosphere of the session room was quite different for each participant. Although each site was adequate in regard privacy, confidentiality, and audio equipment, the atmosphere was not as formal or as consistent as it would have been, had each session been held in my office. Although the environment was addressed with the participant at the beginning of the session, it, nonetheless, directly affected the atmosphere of the session and interview.

The third limitation of the GIM session was that the specific nature of the session was pre-designed, rather than being flexibly responsive to the participant's needs during the session.

Because of this inflexibility, the sessions cannot be considered to be client-centered in terms of treating the participants' therapeutic issues. However, in order to assure that the session would be a suitable intervention for the participants, several criteria were established to recruit only persons with: 1) interest in self-exploration, 2) willingness for self-exploration, 3) verbal ability to express internal experiences, 4) a high level of interest in experiencing music, and 5) a relationship with classical music. Despite these provisos, the treatment for this study cannot be considered client-centered. Even the spontaneous accommodations made to the sessions (such as the induction and music choice) were made within the structured protocol set by the research study.

### **8.6.3 Qualitative interview**

The qualitative interview used a procedure set by a semi-structured interview guide (see Table 4.5). After beginning with a discussion about the transition from the client/therapist role to interviewee/interviewer role, the interview proceeded by playing excerpts of each piece of music from the participant's GIM program and reading sections of the written transcript. Then, I prompted the participant to further elaborate on the music experience. The two procedures – listening/reading and prompting discussion – alternated back and forth, continuing until the end of the music program/transcript was reached.

There were several similarities between the protocol for the music-centered GIM session and the protocol for the interview. It must be assumed that these similarities blurred the boundaries between the nature of the GIM session as therapeutic and the nature of the interview as research. During the interview, the factors listed below probably had the combined effect of furthering the participant's therapeutic experience while at the same time serving the research purpose.

1. I served as clinician/researcher for the study. The decision for me to serve as the GIM therapist and interviewer for the study was made purposefully for the ease of data collection.
2. The close scheduling of the GIM session and the interview. However, the decision to conduct the interview on the same day as the GIM session was made purposefully in order to collect the freshest, most intact descriptions possible and to glean insights that were directly and immediately linked to the GIM session.
3. The questioning process was similar. Both the GIM postlude and the interview protocol used questions that promoted self awareness and reflection.

4. The goals were similar. Both the GIM postlude and the interview procedure had the same goal: to investigate and explore meaning.
5. The reading of the GIM session transcript in the interview. With this reading, the participant's experience from the GIM session was brought fully *into* the interview, rather than simply recalling it. This decision was also made purposefully to collect the strongest possible data.
6. The rehearing of the music program. Both the GIM session and the interview utilized the rehearing of pieces of music, although the interview involved rehearing only excerpts.

The initial part of the interview procedure included a discussion to address these similarities and to help the participant shift to his or her new role, as well as the research-oriented purpose of the interview. In fact, during this discussion I set boundaries by explaining the differences between the purpose of the session and interview and the difference in each of our roles. I made sure that the participant felt comfortable changing roles and I gave ample opportunity for questions. However I realized, through my reflective journal, that although I led a discussion about the change from the client/therapist role to the interviewee/interviewer role, I did not provide an actual experiential process during which this role change could occur. For example, I could have investigated whatever feelings had evolved within the participant towards me in the GIM session by directly asking him or her to reflect upon the feelings or impressions he or she had before we started the interview. This could have helped the participants acknowledge, and set aside, these feelings before delving back into the session content in the interview. On the other hand, since discussing these feelings is akin to a transference discussion, this approach may have simply blurred the boundaries of therapy versus interview even further by bringing another therapy-like process into it.

One lacuna I identified in the general content of the interview was that I did not ask directly about the music therapists' theoretical orientation (whether psychodynamic, humanistic, behavioral, etc). This would have provided an additional context for understanding all of their comments in regard their music experience. Another lacuna in the interview content was specific to Bill's interview. He had a negative experience with the GIM program, feeling that the music never reached him. Because of this, I was generally more uncomfortable during his interview than in the others. I became aware that I was not able to fully investigate his music

experience with him, therefore, his findings have less clarity to me. Although his music experience served this study as an important negative case example, it would have benefitted the study had I been able to examine it even more closely.

An anomalous interview experience occurred with John. At the beginning of the interview, I provided an explanation of the procedures and set boundaries to keep the interview focused on recalling the music experience from the session instead of freshly experiencing the excerpts of music as they were played in the interview. However, early in the interview, John expressed a frustration that his perspective on the piece would not stay stable as he was rehearsing it, and tried to recall his exact experience from the GIM session. Since the interview procedure was designed to accept the participant's experience in whatever form it was expressed without imposing my own preconceived format upon it, I did not strictly hold John in the experience of recalling the GIM session. So for example, when John responded to questions with, "as I hear it *now* the music is . . ." I accepted this perspective, and it became a valued part of the data. Although other participants also responded from the perspective "as I hear it now," no other participant expressed difficulty with this process.

Another irregular interview experience occurred with Michelle. Michelle initially heard her music program from an impersonal, distanced stance. But in the postlude, upon connecting her imagery with her internal world, she was able to relate personally to her repeated piece, the Beethoven *Fifth Piano Concerto, movement 2*. In fact, she even identified it as "*my* song" when she reheard it in the interview. This experience was quite different from the other participants' because they began the interview with a more distanced and reflective perspective, not an intensified, more intimate perspective Michelle did in the Beethoven in the GIM postlude. In the interview, she did not have difficulty reflecting upon her less connected mode of experiencing the piece from the GIM session. However, this significantly changed relationship may have hindered her ability to reflect accurately, since in her case, the interview experience was so diametrically opposed to the GIM experience.

It may be significant that only John and Michelle's interviews stood out to me as irregular in regard their relating back to their music program; the two participants whose repeated piece of music constituted all or almost all of their session. For John, the repeated Rodrigo *Concierto de Aranjuez, movement 2* was his whole program; for Michelle, the three

hearings of the Beethoven *Fifth Piano Concerto, movement 2* was the main part of her program, followed by a short ending piece.

#### **8.6.4. Data collection and analysis**

Several limitations in regard the data and its collection can be mentioned.

1. The participants' music experience was not accurately aligned with the music. The client reported his or her imagery during the music listening. It must be noted that there is a natural lag time between the client's actual response to the music and the verbal reporting of the experience. Bill noted this lag time in his interview. When a GIM client verbalizes her experience while the music is playing, as a clinician it feels like I experience the client's image in synchrony with her and in synchrony with the music. Upon reflection, I wonder about this seemingly simultaneous experience. Perhaps in a GIM session there is some flexibility in experiencing the present moment because of the music and the altered state of consciousness.
2. Inaccuracy of participants' memory among repeated hearings of pieces. I believe it may have been difficult for the participants to remember, with accuracy, the difference between what occurred in the first hearing of a piece and what occurred in the second hearing of it. Although John was the only participant who expressed difficulty in this regard, I am not confident that the rest of the participants' remembering was completely accurate.
3. Lack of attention to the role of the therapist. There is a lack of data in this study in regard the role of the therapist within the therapeutic triad of the GIM session. Geiger (2007) points out that "BMGIM therapists not only offer music and imagery to the client but also a special kind of relationship as an essential part of the music listening period and as a main therapeutic agent" (p. 76).
4. Lack of attention to related variables that affected the participants' responses in the GIM session. The analysis of data in this study cannot possibly take into account the many interrelated aspects that contributed to the participants' music experience in the GIM session. For example, the participant's life context and in-depth relationship with music, the therapeutic relationship from the GIM session including any relationship with me prior to the research, and the influence of the immediate (non-therapeutic) environment of the GIM session.

Despite these difficulties with the data, the participants' direct descriptions of the music experience and the basic contextual information collected provided sufficient information to serve the hermeneutic purpose of this study, which was to broaden my understanding of music-centered GIM by examining the unique music experiences of six study participants through their own verbally described viewpoints.

There were also limitations in the hermeneutic approach to the data analysis. When the participants described their music experience and articulated their own understanding of it in the interview, they did so from their own meaning system. The audio recording of the interview was the most direct expression of their viewpoint. After this layer of data each subsequent layer, beginning with the verbatim transcript and ending with the final horizontal analysis, was a step removed from the participant's meaning system. The participants' descriptions were distilled, diagrammed, and interpreted in three layers of analysis that yielded a summary of 1) what the participant had experienced in the music, 2) how the participant had experienced it, and 3) how the participant understood the experience. Each new layer of analysis yielded new interpretations of the participants' meaning. Then, once I felt I understood the client perspective thoroughly, I would proceed to the final step of the vertical analysis: articulating how *I* understood the client perspective. My intention was to be as open as possible to the client perspective so I could truly expand my viewpoint on the music experience. However, when I arrived at the fourth layer of the vertical analysis, I always discovered that I had merely assimilated the client's perspective into my own rather than allowing the client's perspective to fully influence mine. Most of the first analyses ultimately led to a psychodynamic configuration from my early publications that described the music experience using Winnicott's elements; "me, not-me." When this happened, I returned to the original material. I listened to the audiotape of the GIM session and revisited the interview data. Each time I did so, the relationship between the music experience as an event and the narration of it in the interview brought attention to a different thread of experience from the previous analysis. Subsequently, I would follow the new thread again through all four levels of the vertical data analysis. Each return to the original music experience led to new threads of knowledge and I felt more able to loosen my theoretical focus on Winnicott to integrate more of each participant's unique perspective. This took many repetitions that spiraled back and forth among the GIM session material, the interview data, and the client perspective summaries for each vertical analysis. In fact, the data collected was so rich

that there are many interpretational layers that have yet to be explored. Although the analysis has ended and conclusions have been drawn, it cannot be said that this study has reached a definitive interpretation or conclusion. There are many subtleties within the participants' descriptions still to be discovered after this study's publication. It is quite clear to me that there are endless layers of the participants' unexplored viewpoints within the data and that the study's conclusion is still relatively close to my pre-study understanding of music-centered GIM.

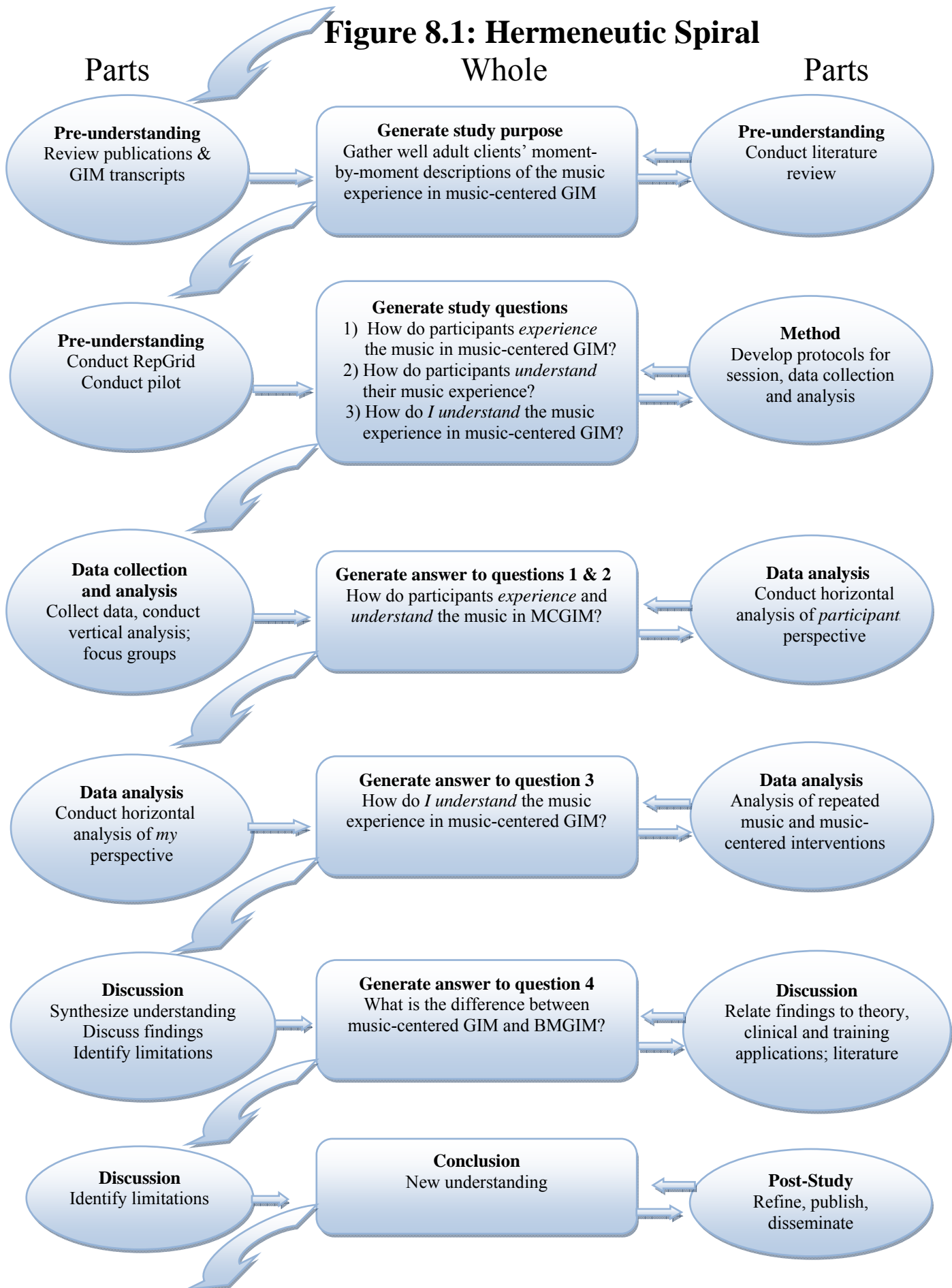
### **8.6.5 Hermeneutic approach**

Several authors offer guidelines for a rigorous and systematic approach to collecting and analyzing qualitative data. Bruschia (2005a) recommends ten elements for inclusion within the qualitative research design: self-inquiry, journaling, consulting, identifying data sources, designing data collection procedures, selecting participants, contextualizing, ethical review, collaborating, and appraising each aspect of the study. Creswell (1998) offers eight elements: prolonged engagement with the material, peer review, negative case analysis, member checking, triangulation, external audit, clarifying researcher bias, and rich, thick descriptions.

The following aspects of this study were based in hermeneutics: the initial self-inquiry into my assumptions about music-centered GIM (a self-hermeneutic); the data was collected in layers to provide successively deepening levels of understanding in regard the participants' perspective of their music experience; the first layer of data – the GIM session – was analyzed for meaning as an unfolding narrative (using a hermeneutic method); and all subsequent data analysis was conducted using a hermeneutic spiral (it was circular, among the layers of data, and repetitive). Figure 8.1 depicts the hermeneutic spiral used in the study. I used Robson's four criteria for trustworthy qualitative research (credibility, dependability, confirmability, and transferability) to evaluate the hermeneutic method used in this study (Robson, 2002; Smeijsters, 1997).



**Figure 8.1: Hermeneutic Spiral**



## Credibility

Credibility in qualitative research is parallel to the concept of internal validity in quantitative research. It ensures that the reader can establish confidence in the truth of the research protocols, how they were carried out, and the researcher's conclusions. To meet these criteria, Robson advocates that the research include: prolonged engagement with the material, persistent observation, peer debriefing, and negative case analysis.

### *Prolonged engagement with the material*

I listened to the audio recordings and read the written transcripts countless times, comparing and contrasting the material in my efforts to interpret the data. In addition, each interpretation of the data was reworked multiple times to yield the study's findings. Not only were there prolonged periods of engagement, but in the stage of interpreting the data a hiatus was also necessary in order to gain perspective and to absorb the material adequately. The repetitive hermeneutic spiraling among the layers of data in the vertical and horizontal analyses assured prolonged, intensive engagement with the data.

Through a comprehensive review of my publications on the topic and an investigation of session transcripts from my clinical practice, I was already intensively engaged with the topic of study (music-centered GIM) at the inception of the research. In addition, throughout the study I was actively teaching GIM and other music and imagery techniques, and I gave several presentations on the early findings of the research. These professional activities throughout the course of the research study contributed to a heightened focus on the material.

### *Persistent observation*

Because I served as clinician and researcher for the study, I was persistent in scrutinizing the phenomenon underlying it; the music experience in music-centered GIM sessions from the inception of the research to its end. I was engaged in observation beginning with the GIM session, as therapist, and continued my observation in the interview, as researcher. In the interview, the participants and I examined music and imagery excerpts from the session and we engaged in a dialogue to co-construct meaning from their music experience. This verbal data was recorded, transcribed, and analyzed. Throughout the study, sufficient observation was conducted to assure that the analysis was relevant and in-depth. However, it is clear that by a continued analysis of the collected data, one would glean additional understanding of the client perspective on music-centered GIM.

*Peer debriefing*

Formal presentations of the research study were required for each PhD course at Aalborg University during the study. Peer reviews took place at each course, at each stage of the research process. The feedback from colleagues and visiting international researchers was valuable and it impacted each aspect of the research project. In addition, I benefited from ongoing consultation with my supervisor, and as a result, many adjustments were made to the design of the study.

*Negative case analysis*

My failure to assess Bill adequately in the prelude of his GIM session led to music choices that were too evocative for him and resulted in misattunement throughout most of his music program. Bill's anxiety reactions to the music program (feeling a need to open his eyes, desire to stop his imagery process) were evidence of this misattunement, although at the time I did not recognize the need to change my strategy for selecting his music. After the session, I identified my insensitivity to his anxiety as a countertransference reaction and reflectively analyzed it. A self-guided reimagining technique (Bruscia, 1998c) and reflective journaling elucidated my conscious and unconscious responses towards Bill. This session served the study as a negative case analysis. Because Bill's music program failed to reach him, his description and understanding of the music contributed critical understanding in regard all aspects of this research, including attunement with music, music choice, and guiding interventions. His data also provided a negative case analysis of the study's finding of the interrelated music and imagery processes that occur in music-centered GIM. Despite these valuable perspectives, Bill's case also weakened the study. Because he was one of only two inexperienced GIM participants, his case reduced the study's pool and weakened the findings.

*Member checking*

There was no member checking of the data analysis in this study. Each participant received a verbatim transcript of the GIM session and interview and was asked to ascertain its accuracy, but I did not conduct a member check in regard the analyses. Since the analysis was intended to expand my own understanding of music-centered GIM, it was not necessary to check my interpreted meanings with the participants.

**Dependability**

Dependability in qualitative research is parallel to the concept of reliability and consistency (replicability) in quantitative research. It necessitates that the researcher uses

systematic and clear processes, and safeguards the research against her biases through two means: clarifying researcher bias and triangulation.

#### *Clarifying researcher bias*

Because I have been engaged in the practice of GIM for thirty years, and in the development of music-centered GIM for fifteen years, I brought well developed personal and professional perspectives on GIM to this study. Therefore, an extensive self-inquiry process and journaling procedures were used to elicit my conscious and unconscious biases. In the initial phase of this study I began a reflective journal to chronicle my pre-understanding of music-centered GIM. But journaling can only identify known, and therefore, conscious belief systems. Therefore, my subconscious biases were elicited and analyzed through an interactive computer program, RepGrid, designed to uncover unconscious constructs (Abrams & Meadows, 2005). These two activities brought to the surface my pre-understanding of music-centered GIM. After the initial period of self-inquiry, I continued the process of reflective journaling. At the end of the study, I returned to the initial self-inquiry to compare it with the study's finding in order to glean further insights from the comparison.

#### *Triangulation*

Triangulation is the use of evidence from different sources or from different types of data. In this study the data was collected from a limited number of participants and only verbal descriptions were utilized as data. The only different sources of data were the material from the GIM sessions and the material from the interview (the event itself versus the description and reflection on the event by the participants). Therefore, triangulation was very limited in this study. Although the completion of one drawing in the GIM session postlude was part of the protocol, in the end, the drawings were not used as data. The participants' motivations in regard to the drawings were quite variable. Both GIM trainees (Hillary and Nancy) were motivated to draw; the moderately GIM experienced candidates (John and Deval) drew only compliantly; Michelle did not want to draw; and Bill preferred drawing his images rather than discussing them, so he enthusiastically drew six pictures instead of one. Since the drawings did not serve a valid therapeutic function with John, Deval or Michelle, it did not seem meaningful to include them as data. However, triangulation using the drawings as an alternate form of data would have contributed significantly to the dependability of the study.

#### **Confirmability**

Confirmability in qualitative research is parallel to the concept of objectivity in quantitative research. It necessitates that the researcher use systematic and clear processes as well as accepted standards of practice throughout the research study. Confirmability assures readers that the findings emerged from a well-designed study, not simply from the researcher's biases. The design should provide for thick, rich descriptions and an enquiry audit.

*Providing thick, rich descriptions*

Since this was a small study, I limited the participants to six, and the data to one GIM session followed by an interview. Because I wanted to gather the richest possible verbal descriptions from these GIM clients, I chose inclusion criteria that would limit the participant group to highly motivated, highly verbal, well, adult participants. The interview was scheduled for the same day in order to gather abundant and fresh verbal data along with insights that were immediately and closely linked to the client's experience. Part of the GIM session protocol was a drawing. It would have benefitted this study to have used the drawings as a data source, however, in the end, they were not.

The participants were selected in pairs for three differing perspectives, representing three different "cases" (Bruscia, 2005a, p. 133-134). Two music therapist/GIM trainees were selected as "critical cases" since they were expected to respond strongly to the GIM session. Two music therapist/non-GIM trainees were selected as "deviant cases" since they were familiar with GIM, but untrained in the method and therefore were likely to give a different perspective from the GIM trainees. Two non-music therapists who were naïve to GIM and towards therapy in general were solicited as "disconfirming cases" since they were likely to give data that contradicted any patterns that might emerge from the music therapist perspective. Participants were evenly divided by gender; three female, three male. However, both GIM experienced participants were female and both moderately GIM experienced participants were male. It would have been more advantageous to have had one female and one male participant within each different case group.

*Enquiry (external) audit*

Several auditing procedures took place through telephone and email communication. I used three specialized consultants who were external from the university as follows:

1. In the initial decision making processes, two GIM Fellow/researchers served as consultants to help develop the study's protocols. One consultant was used in the initial development of the design. A second was solicited as the participant for the pilot study.

After the pilot was conducted, this GIM Fellow was consulted further on each aspect of the method. She supplied a knowledgeable viewpoint about the GIM session procedure, a critical eye in evaluating the qualitative interview process, and she reviewed several prospective data analysis strategies.

2. In the initial self-inquiry with the RepGrid computer program, an external consultant was used. A GIM Fellow/researcher was solicited to help me prepare for, conduct, and analyze the outcome, of the RepGrid procedure.
3. In the concluding phase of the study, an external consultant examined the results. In the data analysis phase, I employed a GIM Fellow/researcher (the pilot study participant) to examine the results sections (chapters 5, 6, and 7). She examined these chapters to ascertain the groundedness of the findings: to determine whether my conclusions appeared to be logically and adequately linked to the data (GIM session material, client experience, and client perspective). Her viewpoint was valuable to the study since her review of the data brought a fresh perspective whereas mine was steeped in the data. In addition, since she had participated in the GIM session/interview she was familiar with the protocols of the study and therefore, she had an experiential context within which to examine the analyses. Her report determined that my perspectives were well linked to the data I had analyzed.

### **Transferability**

Transferability in qualitative research is parallel to the concept of generalization, or external validity, in quantitative research. It ensures that that the reader understands whether the findings are particular to the study or whether they are applicable in other situations. Since random sampling is not used in qualitative research, inductive generalization is too weak to be considered. Therefore, Smaling (2003) proposes an alternative to inductive generalization – analogic generalization – that is especially suited for research studies that are knowledge or practice-oriented. In analogic generalization, the decision about transferability is left to the reader. So, it is essential that the researcher provide the reader with enough context to be able to understand the study's findings, and how to use them, using analogic reasoning.

### *Disclosing researcher and participants' contexts*

In regard the context of the researcher, a rich theoretical framework was provided by the six publications that introduced this study. These publications chronicled the development of my

theoretical orientation in regard music in GIM. An explanation of the theoretical stance of each article is included. As a whole they show that my viewpoint about music experiences is a combination of music-centered, psychodynamic, and humanistic/transpersonal theories. Aigen (2005) calls this bridging theories. This theoretical framework, along with the personal and professional self-inquiry provides the reader with a strong basis within which he can understand and use the findings of the study analogically.

In regard the context of the study's participants, their personal and professional background was collected in the prelude of the GIM session and in a subsequent telephone interview conducted approximately two weeks after the session. This information helped me to understand the client's life outside the research study and to relate this to their perspectives. I also inquired about how the study fit into their personal and professional life and how it had impacted them personally and/or professionally.

Another contextual element is in the interrelatedness of the researcher and participant within the setting of the study. This aspect was given short shrift in this study, in part because our interaction in the study lasted only about three hours. The researcher-participant relation aspect is a weakness in this study because the four music therapist participants were familiar with me professionally through previous educational or research activities. This prior relationship was addressed through several discussions between us; in the initial solicitation of the participants, in the prelude to the GIM session, and in the prelude to the interview. It is interesting to note that this is considered a common weakness in qualitative dissertations. In a recent analysis of qualitative doctoral research from 1987-2007, Aigen (2008) reported that a very high prevalence of dual relationships, 54%, had occurred in the fifty two dissertations he studied.

### *Summary*

The study's credibility, dependability, confirmability, and transferability were appraised and found adequate, even though weaknesses were found in the areas of dependability (lack of triangulation) and transferability (context of prior relationship between researcher and participants). This review encourages cautious analogic generalization of the study's findings on a case-by-case basis. The findings made it clear that any processes found to occur in music-centered GIM with experienced clients cannot be generalized to first-time GIM clients, since the differences between the experienced and naïve participants were so substantial. The findings

may carry implications regarding the practice of music-centered GIM and BMGIM with advanced GIM clients.

## **8.7 Conclusion**

### **8.7.1 Pre- versus post-study understanding**

Gadamer states: “The work of art expresses something in such a way that what is said is like a discovery, a disclosure of something previously concealed. The element of surprise is based on this. . . To understand what the work of art says to us is therefore a self-encounter. But as an encounter with the authentic, as a familiarity that includes surprise, the experience of art is experience in a real sense and must master ever anew the task that experience involves: the task of integrating it into the whole of one’s own orientation to a world and one’s own self-understanding” (1977, p. 101-102). This study used a hermeneutic spiral to assist in the task of understanding how clients experienced classical music as a therapeutic self-encounter. As Gadamer suggests, within the familiarity of their music relation, they found discovery, disclosure, and surprise. In the form of a projection-reintrojection cycle these were integrated and transformed into a new self-experience.

The GIM literature does include research and publications on music in GIM, but this is the first study to examine the music experience when it serves as the primary therapist within a GIM session. Although I systematically examined the client perspectives from this study, I still wondered whether they had truly broadened my own perspective, and if so, how? Two brief comparisons of my pre and post-study perspectives will suffice to demonstrate my broadened perspective.

I compared two analyses: a pre-study analysis from the RepGrid procedure and one present study analysis. I chose Geraldine’s session from the RepGrid analysis to represent my pre-understanding (Geraldine was a GIM experienced client from my private practice) and I chose John’s session to represent my post-study understanding. In their music-centered GIM sessions, both Geraldine and John initially experienced the music as telling them stories. Then they both progressed to enjoying the aesthetic dimensions, and the tensions, inherent in the music. Both sessions culminated in an experience of “riding” the music in which each client was transformed into a new state of consciousness that was felt to be a responsive solution to the presenting issue of turmoil in their lives. In retrospect, I examined the constructs from my pre-study perspective in relation to Geraldine’s music-centered GIM. The constructs derived from



Geraldine's pre-study session are listed in Table 8.2. They indicate that I was focused on the client, myself, and on the session as a whole. In retrospect, it seems that my pre-understanding was not at all music-centered. The table compares Geraldine's constructs with the themes derived from John's GIM session. These themes indicate that my new perspective is now focused directly, and in more depth, on the music experience.

**Table 8.2: Pre vs. post-study perspectives**

<b>Geraldine: Pre-study understanding – Constructs</b>	<b>John: Post-study understanding – Themes</b>
Music defined the outcome of the session	Music was something to which you should listen
Client described the music	Music provided direction
Client was totally absorbed in the music	Music was dependable
Session solution from music/higher power	Music brought a receptive, transpersonal experience
Session was reconstructive	Music gave access to the true self
Session was music centered	Music gave message of self acceptance
I used music-centered guiding	Music brought a bodily experience
I was music-centered	Music brought a fully alive experience
	Music was aesthetically beautiful
	He merged with the music

I re-examined the publication (Summer, 1992) that opens this research study in which I theorize about how the music in GIM stimulates transpersonal experiences and why this is therapeutic. In the article's conclusion I sum up my understanding; "*The music knows the answer; it is up to the client to bring in his difficulty, and to allow the music to guide him to its origin, or perhaps its solution*" (p. 53). I can now update this statement with new perspectives from this study as follows:

*The client who knows his difficulty also knows its answers, but the answers are marginalized, and irretrievable within him. It is up to the therapist to help the client surrender to the music so he can discover a meaningful response to his difficulty within it. The music actually serves this process as a complex container within which the client experiences the multilayered music and the multileveled consciousness of the therapist and himself. What the client hears coming from within the music is actually one of many of his own (previously irretrievable) answers projected onto the music. But once the client's music experience deepens, he gains access to this particular answer from the music and this transforms his consciousness.*

I encountered a parallel process between the music experience in music-centered GIM and my hermeneutic search for meaning in the study's data analysis. Just as there was no correct or single response to a client's difficulty, there was no correct or single interpretation to be discovered within the data. With every repeated listening and every repeated analysis, a new thread of experience could, and did, emerge. Whereas in GIM the deeper relating to music changes the client's consciousness, in the hermeneutic data analysis deeper interpretations changed my perspective. It seems that there are ever different and ever deeper destinations within the music and within the data to discover. And in the end there is no final destination, only journeys that lead us back to ourselves.

### **8.7.2 Summation of findings**

Each participant brought a unique personal and musical perspective into this study. I understood each participant to have developed a unique relation to the GIM program in their session that was connected to his or her presenting psychological/spiritual issues:

- To Hillary, the music felt like a powerful authority that required submission
- To John, the music felt like a wise grandfather to whom he needed to listen very deeply
- When Nancy heard beauty in the music, she wanted to become like it
- The music led Deval in a particular direction that he needed to follow
- The music told Michelle a story that she needed to decipher
- For Bill, music was something to enjoy, but he could not relate to his music program

All of the participants' multiple perspectives were synthesized into my own at the conclusion of this research study: In music-centered GIM, repeated music and music-centered verbal guiding interventions created a receptive listening attitude in the client and deepened the client's relational capacity towards the music. This capacity deepened when the music was felt as dependable, as aesthetically beautiful, as providing direction, as a merger experience, as something to which you should listen with respectful attention, and/or as something deeply profound and beyond the personal self. The client projected marginalized aspects of the self onto the music, but these aspects were experienced as coming from the music, not as coming from the self. When experienced within the music, or experienced as images, these aspects were accepted as desirable and reintrojected into the internal world; felt as a new experience. In the imagery

process these aspects were often felt as bodily experiences, as messages of self-acceptance, as one's "true" self, and as being more fully present in the here-and-now.

In the music-centered GIM sessions, if the music relation had deepened by the end of the music program, then the projection-reintrojection imagery cycle was also completed. This resulted in a new state of consciousness that embraced a new aspect of the self. If the music relation remained the same throughout the GIM program, the imagery cycle was not completed. In this case, other (re-educative) therapeutic goals were reached (for example identifying and gaining new perspectives on psychological issues) but the result was not a transformation of consciousness.

To summarize, in music-centered GIM, the client's state of consciousness, and hence the self-experience, was transformed or reconstructed through a deepened relation with the music program and through a concomitant projection-reintrojection cycle through imagery. In conclusion, the Bonny Method of GIM and music-centered GIM are both transformative, receptive music therapy methods in which interrelated musical and psychological processes lead to the transformation of consciousness. Whereas BMGIM transforms the client's state of consciousness through the development of images, music-centered GIM transforms the state of consciousness by developing the relation to the music program through the use of repeated music and music-centered guiding interventions.

## Chapter 9: English Summary

### Motivation and purpose of the study

An analysis of the theoretical underpinnings of my six publications in this dissertation was conducted to begin this study. Three different theoretical perspectives were found: psychodynamic, humanistic/transpersonal, and music-centered; and the publications typically bridged two theories together. In addition, the main themes from each publication were distilled, and described. Four early publications revealed a central theme: theorizing about how music works within the client-music relationship in GIM. Two more recent publications chronicled the main modifications of the Bonny Method of GIM (BMGIM) that I had developed through years of clinical practice. These two main themes – the GIM client’s relationship with music and BMGIM modifications – generated the topic of the current study.

A review of the GIM literature found publications in which music is identified as the “co-therapist” within the therapeutic triad (music, client, therapist), and revealed the need to study music as the primary therapist in GIM. Therefore, the present study was designed to examine music-centered GIM, a modification of BMGIM that emphasizes music’s primacy.

Music-centered GIM had been developed in my clinical practice as a response to the needs of my clients – adults who were diagnosed with mood, addiction, and anxiety disorders. Its development had come solely from *my* perspective; I had not taken into account the client perspective. Therefore, the purpose of the study was established: to better understand the *client* perspective of the music experience in music-centered GIM. This led to my determination to collect verbal descriptions of the music experience through a qualitative interview.

### Research questions

I needed to more thoroughly examine my pre-understanding of music-centered GIM. Therefore, I undertook a computerized process of self-analysis, RepGrid, framed by two questions: *How am I defining music-centered GIM?* and *What are the clinical intentions of music-centered GIM ?* The RepGrid analysis brought my preconceived assumptions about music-centered GIM to conscious awareness.

A pilot study was conducted with one GIM experienced participant. This pilot was instrumental in developing protocols for the data collection and data analysis. Another outcome of the pilot study was the identification the study’s three research questions:

1. *How do participants experience the music portion of a music-centered GIM session?*

2. *How do participants understand the music experience in a music-centered GIM session?*
3. *How do I understand the music experience in music-centered GIM?*

## Method

Since I was seeking the client perspective I determined it would be best to utilize well adult clients who could give rich verbal descriptions of their music experience. I solicited six well adults with varying degrees of GIM experience. Serving as clinician/researcher, I gave each participant one music-centered GIM session. The music-centered GIM session adhered to the traditional protocol of a BMGIM session: prelude, induction, music imaging, return, and postlude. But the music imaging protocol included two modifications: 1) repeated music – instead of a music program comprised of different pieces, the music program included repeated hearings of the same piece; and 2) music-centered guiding – instead of verbal interventions that focus primarily on imagery, the interventions focused primarily on the music.

After the GIM session, each participant was interviewed about the music portion of their session. In the interview the participant heard portions of the music program from the GIM session along with excerpts from the transcript of imagery. Each participant was questioned using a semi-structured interview guide.

## Results

A summary of each participant's GIM session included a narrative report of the imagery and a mandala drawing. The music programs for the study were as follows:

### Hillary

Faure *Pavane*

Debussy *String Quartet, Andantino*

Copland *Rodeo, Corral Nocturne*: 4 hearings

### John

Rodrigo *Concierto de Aranjuez, mvt 2*: 2 hearings

### Nancy

Wagner *Siegfried Idyll*

Mozart *Vesperae Solemnnes, Laudate Dominum*: 3 hearings

### Deval

Bach (orchestrated) *Prelude in Eb m*

Beethoven *Violin Concerto, mvt 2*: 2 hearings

Mascagni *Cavalleria Rusticana, Regina Coeli*

Canteloube *Songs of the Auvergne, Brezairola*: 3 hearings

### **Michelle**

Beethoven *Piano Concerto #5, mvt 2*: 3 hearings  
Schumann *Fünf Stücke im Volkston, Langsam*

### **Bill**

Respighi *Pines of Rome, Gianicolo*  
Strauss *Death and Transfiguration, Transfiguration*  
Brahms *Symphony #3, mvt 3*: 2 hearings  
Debussy *Dances Sacred and Profane*  
Faure *Pavane*

The data – the six GIM sessions and six interviews – was analyzed using a hermeneutic spiral in order to answer the three research questions. A layered analysis yielded six vertical case studies that illustrated the unique perspectives of each *participant*. Subsequently, another layered vertical analysis yielded *my* understanding of each participant's music experience. In brief, my understanding is as follows:

- For Hillary, the music felt like a powerful authority that required submission
- To John, the music felt like a wise grandfather to whom he needed to listen very deeply
- When Nancy heard the beauty in the music, she wanted to become like it
- The music led Deval in a particular direction and he needed to follow it
- The music told Michelle a story and she needed to decipher it
- For Bill, music was something to enjoy; but he could not relate to this music

Next, a layered horizontal analysis synthesized the *participants'* perspectives into thirteen themes:

1. The participant related personally to the music
2. The music brought attention to a specific internal conflict
3. The music brought a new, useful perspective
4. The music was regarded with respectful attention
5. The music provided direction
6. The music was completely dependable
7. The music brought a deeply receptive, transpersonal experience
8. The music gave access to the true self
9. The music gave a message to accept previously marginalized aspects of the self
10. The music brought a bodily experience

11. The music brought a here and now experience
12. The music was experienced as aesthetically beautiful
13. The participant merged with the music

These themes can be integrated to explain how the six participants experienced, and understood, the music portion of their GIM session: *For all participants*, the music was regarded with respectful attention and it provided the direction for the session. *For all GIM-experienced participants*, the music became a transpersonal experience. When the music sounded aesthetically beautiful and felt dependable, they listened deeply and receptively, felt it in their bodies, accepted marginalized aspects of the self, gained access to their positive core self and it sometimes brought a here-and-now and/or a merging experience. *The two inexperienced GIM participants* did not relate personally to the music and they did not have transpersonal music experiences. But their music experiences resulted in insight-oriented postludes. One felt the music as aesthetically beautiful and, in the postlude when she felt related to it, she gained insight into an internal conflict. Another did not relate personally to the music at all. In fact, he did not like the music, yet in the postlude he was able to identify several internal conflicts that needed further attention.

The final horizontal analysis synthesized *my* perspective into a summary description of a twofold music and imagery process that answered the research question: How did I understand the music experience in music-centered GIM?:

In music-centered GIM, repeated music and music-centered verbal guiding interventions created a receptive listening attitude in the client and deepened the client's relational capacity towards the music. The capacity deepened when the music was felt as dependable, as aesthetically beautiful, as providing direction, as a merger experience, as something to which you should listen with respectful attention, and/or as something deeply profound and beyond the personal self. The client projected marginalized aspects of the self onto the music, but these aspects were experienced as coming from the music, not as coming from the self. When experienced within the music or as images, these aspects were then accepted as desirable and reintrojected into the internal world, felt as a new experience. By the end of the music program, if the music relation had deepened, then the projection-reintrojection imagery cycle was completed. This resulted in a new state of consciousness that embraced a "new" aspect of the self. In the imagery process these aspects were felt as messages of self-acceptance, as one's

“true” self, and often as bodily experiences and/or as being more fully present in the here-and-now. If the music relation had remained the same throughout the GIM program, then the projection-reintrojection imagery cycle was not completed. In this case, other (re-educative) therapeutic goals were reached – identifying or gaining new perspectives on psychological issues – but in this case, there was no transformation of consciousness. To summarize, in music-centered GIM, the client’s state of consciousness and hence, the self-experience, was transformed, or “reconstructed” through a deepened relation with the music program and through a concomitant projection-reintrojection cycle through imagery.

A fourth research question emerged during the data analysis: *What is the difference between music-centered GIM and the Bonny Method of GIM?* Therefore, a systematic analysis of the GIM session transcripts, interview transcripts, and two impromptu focus groups were undertaken to gain a deeper understanding of the use and therapeutic intent of the two GIM adaptations: music repetition and music-centered guiding. The analysis yielded some simple quantitative results that indicated the use of each adaptation. The qualitative analysis distinguished three types of music repetitions that had been used: music-oriented, transformation-oriented, and introjection-oriented repetitions. Four types of music-centered guiding interventions were identified: listening to the music, describing the music, deferring to the music, and tying the imagery to the music. The examination of the use and intent of the adaptations during the six participant GIM sessions confirmed that the underlying goal of the adaptations was to establish a more intimate relationship with the music program, to allow the music to serve as the primary therapist for the session. The music-centered verbal interventions established a central focus upon the music, rather than any imagery that was occurring and when imagery did occur, they established a link from the imagery to the music, while keeping the music as central. Two focus groups of GIM therapists and trainees contributed an additional perspective: that music-centered interventions not only created a more intimate client-music relation, but it created a more intimate feeling to the relationship between the client and therapist, and the therapist and music, as well.

The answers to the four research questions can be synthesized into a summary finding: Music-centered GIM works through the use of repeated music and music-centered guiding to establish the music as the primary experience in a GIM session. The use of these two adaptations deepens the participant’s relational capacity towards the music. Concomitant with



the changes in the participant's music relation, a projection-reintrojection cycle occurs with the imagery. When these interrelated processes occur during the music program there is a transformation of the client's state of consciousness: a transpersonal experience occurs.

The Bonny Method of GIM and music-centered GIM are both reconstructive or transformative music therapy methods that involve an interrelated deepening of the music relation and the self relation. Whereas BMGIM transforms the client's state of consciousness through the development of images, music-centered GIM transforms the state of consciousness by developing the relation to the music program.

### **Discussion**

The final chapter of the research study discusses these findings in relation to my previous publications and the GIM literature. Applications for clinical practice are identified and curriculum plans for a new paradigm of GIM training are reported. The limitations of the study are described to include the small number of participants and their prior relationship with the researcher; the singular, pre-designed GIM session and the session setting; the possibility of blurred boundaries between the session and interview protocols; the lack of attention to the role of the therapist, no triangulation in the collection of data, and a conclusion that is still relatively close to my pre-understanding. Cautious analogic generalization of the study's findings on a case-by-case basis concludes the study.

## Chapter 10: Dansk resumé

### Motivation for og formålet med undersøgelsen

Undersøgelsen tog udgangspunkt i en analyse af det teoretiske grundlag for mine seks tidligere publicerede artikler og kapitler. Tre forskellige perspektiver blev identificeret: et psykodynamisk, et humanistisk-eksistentielt og et musikcentreret. De enkelte publikationer forsøgte typisk at forbinde to af disse perspektiver. Motivationen for og formålet med den nye undersøgelse stammer – ligesom den kliniske protokol og forskningsspørgsmålene – i alt væsentligt fra dette teoretiske grundlag.

Hovedtemaerne i de seks publikationer blev også identificeret og beskrevet. De første fire publikationer beskæftiger sig alle med et centralt tema: etableringen af en teoretisk forståelse af musikkens rolle og funktion inden for klient-musik-relationen i Guided Imagery and Music (GIM). De to sidste publikationer gør rede for de vigtigste af de modifikationer af The Bonny Method of Guided Imagery and Music (BMGIM), som jeg gennem mange års kliniske praksis har udviklet i forhold til voksne klienter med diagnoser relateret til forstyrrelser af stemningsleje, angstproblemer og misbrug. Disse to temaer – fokuseringen på klient-musik-relationen og GIM-modifikationer – blev kombineret i denne undersøgelses kliniske protokol: musikcentreret GIM.

I gennemgangen af GIM-litteraturen omtales en række tekster, i hvilke musikken identificeres som ”co-terapeut” inden for den terapeutiske trekant (musik, klient, terapeut), mens der ikke fandtes litteratur om musikken som ”primær terapeut”. Bl.a. derfor blev nærværende undersøgelse tilrettelagt som en undersøgelse af musik-centreret GIM som en modifikation af GIM, der understreger musikkens primære status. Musik-centreret GIM er en modifikation af BMGIM, som i den undersøgelses sammenhæng defineres af de to modificerende elementer: musikvalg og strategier for guidning. Musik-centreret GIM karakteriseres gennem anvendelsen af et musikprogram, som inkluderer gentagelser af udvalgte klassiske musikstykker/satser i en interaktiv proces mellem en klient og en guide, som primært anvender musik-centrerede interventioner i sin guidning.

Musik-centreret GIM blev udviklet som et svar på mine klienters kliniske behov. Eller mere præcist formuleret: udviklingen var baseret på *min* forståelse af klienternes behov. Mine publikationer udtrykker *mit* perspektiv, mens mine klienter ikke kommer direkte til orde i disse publikationer. Dette fører til to spørgsmål: Hvad er mine klienters perspektiv på sagen? Hvordan oplever *de* musikken i en GIM session? Disse spørgsmål var den primære årsag til min

beslutning om at indsamle verbale data fra klienter via kvalitative interviews, som gav dem mulighed for at formulere deres perspektiv i en udvidet narrativ form. Således blev undersøgelsens formål fastlagt til at være: en undersøgelse af klient-perspektivet på musikoplevelsen i Musik-centreret GIM.

### **Forskningsspørgsmål**

Forud for den empiriske data-indsamling gennemførte jeg ud fra hermeneutiske principper en undersøgelse af min forforståelse af fænomenet Musik-centreret GIM. Dette skete i form af en selvanalyse baseret på computerprogrammet RepGrid og to spørgsmål: *Hvordan definerer jeg Musik-centreret GIM?* og *Hvilke kliniske intentioner ligger til grund for Musik-centreret GIM?* RepGrid-analysen synliggjorde mine mere eller mindre ubevidste tanker og fordomme om Musik-centreret GIM.

Jeg gennemførte herefter et pilotprojekt med en GIM-erfaren klient. Pilotprojektet var et afgørende element i udviklingen af metoden til dataindsamling og dataanalyse. Et yderligere udbytte af pilotprojektet var den endelige formulering af undersøgelsens tre forskningsspørgsmål:

1. *Hvordan oplever undersøgelsesdeltagerne musikdelen af en Musik-centreret GIM-session?*
2. *Hvordan forstår deltagerne musikoplevelsen i en Musik-centreret GIM-session?*
3. *Hvordan forstår jeg selv musikoplevelsen i Musik-centreret GIM?*

### **Metode**

For di formålet var at undersøge klientperspektivet besluttede jeg som deltagere at rekruttere velfungerende voksne klienter, som kunne bidrage med indholdsrige beskrivelser af deres musikoplevelser. Jeg udvalgte seks raske, velfungerende voksne med forskellig GIM-erfaring (fra stor erfaring til ingen erfaring). I dobbeltrollen som kliniker/forsker gav jeg hver af de seks deltagere en Musik-centreret GIM-session. Denne session bestod af BMGIM-sessionens fem traditionelle faser: præludium (samtale), induktion (afspænding), musikrejse (musiklytning i en let ændret bevidsthedstilstand, med dialog mellem klient og guide), tilbagevenden til normal bevidsthedstilstand (inkl. evt. mandala-tegning) og postludium (samtale).

Efter GIM-sessionen gennemførte jeg et interview med hver enkelt deltager om oplevelserne i musikdelen af deres session. Deltageren hørte uddrag af musikprogrammet fra sessionen, samtidig med at jeg læste uddrag af rapporten om billeddannelsen. Der blev anvendt en semistruktureret interview-guide.

## **Fremgangsmåde**

Nedenstående oversigt viser det musikprogram, der blev anvendt til hver enkelt deltager. Derudover indeholder hver sessionsrapport en mandala-tegning og en narrativ fremstilling af billeddannelse i musikrejsen ("indholdet" af deltagerens oplevelser under musiklytningen).

## **MUSIKPROGRAMMER TIL DE SEKS DELTAGERE – med angivelse af gentagelser**

### **Hillary**

Faure *Pavane*

Debussy *String Quartet, Andantino*

Copland *Rodeo, Corral Nocturne*: 4 gennemspilninger

### **John**

Rodrigo *Concierto de Aranjuez, mvt 2*: 2 gennemspilninger

### **Nancy**

Wagner *Siegfried Idyll*

Mozart *Vesperae Solemnnes, Laudate Dominum*: 3 gennemspilninger

### **Deval**

Bach (orchestrated) *Prelude in Eb minor*

Beethoven *Violin Concerto, mvt 2*: 2 gennemspilninger

Mascagni *Cavalleria Rusticana, Regina Coeli*

Canteloube *Songs of the Auvergne, Brezairola*: 3 gennemspilninger

### **Michelle**

Beethoven *Piano Concerto #5, mvt 2*: 3 gennemspilninger

Schumann *Funf Stucke im Volkston, Langsam*

### **Bill**

Respighi *Pines of Rome, Gianicolo*

Strauss *Death and Transfiguration, Transfiguration*

Brahms *Symphony #3, mvt 3*: 2 gennemspilninger

Debussy *Dances Sacred and Profane*

Faure *Pavane*

## **Resultater**

Samtlige data – de seks GIM-sessioner og de seks interviews – blev analyseret ud fra den hermeneutiske metodes spiralformede logik med henblik på at besvare de tre forskningsspørgsmål. Analyserne har flere lag og præsenteres som seks vertikale (dvs. enkeltstående) case studies, hvor hver case belyser den pågældende deltagers unikke perspektiv. I en efterfølgende flerlaget vertikal analyse afdækkes min forståelse af deltagernes musikoplevelser i form af et narrativ om de musikalske episoder og den musikalske overføring

hos hver enkelt deltager. Den musikalske overføringsrelation kan for hver enkelt deltager formuleres således:

- Hillary oplevede musikken som en magtfuld autoritet, der krævede underkastelse
- John oplevede musikken som en viis bedstefar, han måtte lytte med stor opmærksomhed
- Da Nancy oplevede musikkens skønhed, ønskede hun at blive ligesom den
- Musikken førte Deval i en bestemt retning, som han nødvendigvis måtte følge
- Musikken fortalte Michelle en historie, som hun var nødt til at forstå
- For Bill var musik en kilde til nydelse, men han kunne ikke bruge den valgte musik

Herefter gennemførte jeg en flerlaget horisontal, dvs. sammenlignende analyse af deltagernes oplevelser, som kan sammenfattes i 13 temaer – der samtidig udgør svaret på forskningsspørgsmål 1 og 2:

1. Deltageren etablerede et personligt forhold til musikken
2. Musikken skabte opmærksomhed omkring en specifik intrapsykisk konflikt
3. Musikken fremkaldte et nyt, brugbart perspektiv på konflikten/problemet
4. Musikken blev mødt med respektfuld opmærksomhed
5. Musikken angav en retning for processen
6. Deltageren kunne stole 100% på musikken
7. Musikken fremkaldte en dyb receptiv, transpersonlig oplevelse
8. Musikken åbnede døren til det sande selv
9. Musikken rummede et budskab om at acceptere hidtil marginaliserede aspekter af selvet
10. Musikken fremkaldte en kropslig oplevelse
11. Musikken fremkaldte en her-og-nu-oplevelse
12. Musikken blev oplevet som noget æstetisk smukt
13. Deltageren smeltede sammen med musikken

Disse temaer kan sammenfattes i forhold til deltagerne på følgende måde:

*Alle deltagere* omfattede musikken med respektfuld opmærksomhed, og musikken angav en retning for deres sessions forløb.

*Alle GIM-erfarne deltagere* fik gennem musikken en transpersonlig oplevelse. Fordi musikken for dem var æstetisk smuk og fuldt troværdig kunne de gå ind i en meget dyb lytteoplevelse, der kunne mærkes i kroppen. Denne oplevelse førte til en accept af hidtil

marginaliserede selv-aspekter, gav adgang til deres positive kerneselv og fremkaldte i nogle tilfælde en her-og-nu-oplevelse eller en oplevelse af sammensmeltning med musikken.

*De to GIM-uerfarne deltagere* etablerede ikke en personlig relation til musikken, og de fik ingen transpersonlig oplevelse. Deres musikoplevelser førte imidlertid til ny indsigt i sessionens postludium (den afsluttende samtale). Den ene oplevede musikken som æstetisk smuk, og da hun i postludiet følte sig forbundet med den, fik hun indsigt i en intrapsykisk konflikt. Den anden kunne slet ikke etablere en personlig relation til den valgte musik, men i postludiet var han alligevel i stand til at identificere flere intrapsyriske konflikter som krævede mere opmærksomhed.

I en afsluttende horisontal analyse har jeg sammenfattet *mit* personlige perspektiv i en koncentreret beskrivelse af en todelt musik- og billeddannelsesproces, som samtidig udgør besvarelsen af forskningsspørgsmål 3:

I de undersøgte musik-centrerede GIM-sessioner skabte gentagelserne af udvalgt musik og den musik-centrerede guidning en særlig lyttemåde hos klienten og gjorde klientens relation til musikken dybere. Forholdet til musikken blev dybere, når musikken blev oplevet som 100% pålidelig, som æstetisk smuk, som en vejviser, som noget man kunne smelte sammen med, som noget der skulle lyttes til med respektfuld opmærksomhed, og/eller som noget dybt hinsides det personlige selv. Klienten projicerede marginaliserede aspekter af det personlige selv over på musikken, men disse aspekter blev oplevet som om de kom fra musikken, ikke fra selvet. Når disse aspekter blev oplevet i musikken eller gennem billeddannelsen, kunne de accepteres som ønskelige og reintrojiceres i den intrapsyriske verden, oplevet som en helt ny erfaring. I billeddannelsesprocessen blev disse aspekter oplevet som meddelelser om nødvendigheden af selv-accept, meddelelser fra eller om det ”sande” selv, ofte i form af kropslige oplevelser og/eller oplevelser af at være fuldt til stede her og nu. Hvis forholdet til musikken blev uddybet på den beskrevne måde, kunne denne projektion-reintrojektions-cyklus fuldendes hen imod slutningen af musikprogrammet, hvilket førte til en ny bevidsthedstilstand, hvor det ”nye” selv-aspekt kunne bydes hjertelig velkommen. Hvis forholdet til musikken forblev uændret gennem GIM-programmet, kunne denne cyklus ikke fuldendes. I disse tilfælde kunne andre terapeutiske mål indfries – f.eks. at få ny indsigt i eller nye perspektiver på psykologiske problemer – men der fandt ikke nogen bevidsthedstransformation sted. Sammenfattende kan man sige, at klientens bevidsthedstilstand og selvoplevelse blev transformeret eller ”omdannet” gennem Musik-

centreret GIM via en uddybet relation til musikprogrammet og en samtidig projektion-reintrojektions-cyklus gennem billeddannelsen.

Under dataanalysen blev der formuleret et fjerde forskningsspørgsmål: *Hvad er forskellen mellem Musik-centreret GIM og BMGIM?* For at besvare dette spørgsmål gennemførtes en systematisk analyse af GIM-transskriptionerne og interview-transskriptionerne, suppleret med to improviserede fokusgrupper, for at opnå en dybere forståelse af anvendelsen af den terapeutiske intention med de to GIM-modifikationer: musik-gentagelsen og den musikcentrerede guidning. Gennem analysen fremkom nogle simple kvantitative delresultater, som indikerede visse tendenser i anvendelsen af de to modifikationer. I den kvalitative analyse blev der skelnet mellem tre typer musik-gentagelse: en musikorienteret, en transformationsorienteret og en introjektionsorienteret, ligesom der blev skelnet mellem fire interventionstyper i den musikcentrerede guidning: interventioner, hvor klienten blev opfordret til 1) at lytte opmærksomt til musikken, 2) at beskrive musikken, 3) at lade sig føre af musikken, 4) at knytte billeddannelsen an til musikken. Den kvantitative næranalyse af anvendelsen af og intentionen med disse musik- og interventionstyper i de seks deltagers sessioner bekræftede, at formålet med modifikationerne var at deltageren fik mulighed for at etablere et mere intimt forhold til musikken og derigennem gøre det muligt for musikken at optræde som primær terapeut i sessionen. Interventionerne tjente til at holde fokus på musikken frem for på billeddannelsen, og når der opstod billeder at knytte dem til musikken igen, så musikken under alle omstændigheder var det centrale oplevelsesfokus. De to fokusgrupper, hvis deltagere var GIM-terapeuter og – studerende, bidrog med yderligere et perspektiv: musik-centrerede interventioner skaber en større intimitet, ikke bare i klient-musik-relation, men også i klient-terapeut-relationen og i terapeut-musik-relationen.

Svarene på de fire forskningsspørgsmål kan sammenfattes på følgende måde: Musik-centreret GIM fungerer på den måde, at musik-gentagelser og musik-centreret guidning gør musikken til den primære oplevelsesfaktor i GIM. Anvendelsen af de to modifikationer muliggør en uddybning af klientens forhold til musikken. I tæt sammenhæng med dette opstår der en projektion-reintrojektions-cyklus i forhold til billeddannelsen. Når disse forbundne processer optræder i forbindelse med et musikprogram sker der en transformation af klientens bevidsthed: en transpersonlig oplevelse kan forekomme. BMGIM og Musik-centreret GIM er to nært beslægtede musikterapi-metoder, der har bevidsthedstransformation som formål, og som

tilstræber en uddybning af klientens forhold til musikken og selvet. Mens BMGIM transformerer bevidstheden gennem udviklingen af indre forestillingsbilleder, sker transformationen af bevidstheden i Musik-centreret GIM gennem en uddybning af forholdet til musikprogrammet.

Undersøgelsens sidste kapitel diskuterer undersøgelsesresultaterne i forhold til mine tidligere publikationer og GIM-litteraturen. Undersøgelsens kliniske relevans diskuteres, og der formuleres et muligt nyt paradigme for GIM-uddannelsen. Undersøgelsens begrænsninger behandles, og der peges her bl.a. på de problemer der er knyttet til 1) det meget begrænsede deltagerantal, 2) deltagernes forhåndskendskab til forsker-klinikeren, 3) sessionens lidt diffuse setting og singulære karakter, 4) de uklare grænser mellem sessionen og interviewet, 5) den manglende undersøgelse af terapeutens rolle, 6) fraværet af metode-triangulering, og 7) at konklusionen ikke adskiller sig markant fra forskerens forforståelse. Afhandlingen afsluttes med forsigtige forslag til analoge generaliseringer af undersøgelsens resultater på case-niveau.

(oversættelse: Lars Ole Bonde)



## Chapter 11: References

- Abrams, B. (2001). Defining transpersonal experiences of guided imagery and music (GIM). (Doctoral dissertation, Temple University, 2000). *Dissertation Abstracts International-A*, 61 (10), 3817
- Abrams, B. (2002a) Methods of analyzing music programs used in the Bonny method. In K. Bruscia & D. Grocke (Eds.), *Guided imagery and music: The Bonny method and beyond* (pp. 317-338). Gilsum, NH: Barcelona Publishers.
- Abrams, B. (2002b). Transpersonal dimensions of the Bonny method. In K. Bruscia & D. Grocke (Eds.), *Guided imagery and music: The Bonny method and beyond* (pp. 339-358). Gilsum, NH: Barcelona Publishers.
- Abrams, B. & Meadows, A. (2005). Personal construct psychology and the repertory grid technique. In B.L. Wheeler (Ed.) *Music therapy research*. Second edition (pp. 472-486). Gilsum, NH: Barcelona Publishers.
- Abbott, E. (2004). Client experiences with the music in the Bonny method of guided imagery and music (BMGIM). In A. Meadows (Ed.) *Qualitative inquiries in music therapy: A monograph series*. Gilsum, NH: Barcelona Publishers.
- Aigen, K. (2005). *Music-centered music therapy*. Gilsum, NH: Barcelona Publishers.
- Aigen, K. (2008). An analysis of qualitative music therapy research reports 1987-2006: Doctoral studies. *The Arts in Psychotherapy*, 35(5), p. 307-319.
- Aksnes, H. & Ruud, E. (2008). Body-based schemata in receptive music therapy. *Musicae Scientiae*, XII(1), p. 49-71.
- Altshuler, I. (1948). A psychiatrist's experience with music as a therapeutic agent. In D.M. Schullian & M. Schoen (Eds.), *Music and medicine* (pp. 266-281). Freeport, NY: Books for Libraries Press.
- Altshuler, I. (2000). A psychiatrist's experience with music as a therapeutic agent. *Nordic Journal of Music Therapy*, 10(1), p. 69-76.
- Band, J., Quilter, S. & Miller, G. (2001-02). The influence of selected music and inductions on mental imagery: Implications for practitioners of guided imagery and music. *Journal of the Association for Music and Imagery*, 8, p. 13-34.

Blake, R. (1994). Vietnam veterans with post traumatic stress disorder: Findings from a music and imagery project. *Journal of the Association for Music and Imagery*, 3, p. 5-17.

Bonde, L. O. (2004). To draw from bits and pieces a more supportive narrative: An introduction to Paul Ricoeur's theory of metaphor and narrative and a discussion of its relevance for a hermeneutic understanding of music-assisted imagery in The Bonny Method of Guided Imagery and Music (BMGIM). *Canadian Journal of Music Therapy*, XI (1).

Bonde, L.O. (2005). Quantitative and qualitative investigation into the influence of receptive music therapy with cancer survivors. Doctoral dissertation. Institute for Music and Music Therapy, Aalborg University, Denmark.

Bonde, L.O. (2007). GIM database. <http://www.mt-research.aau.dk/guided-imagery-music-resource-center>.

Bonde, L.O. (2007a). Imagery, metaphor, and perceived outcome in six cancer survivors' BMGIM therapy. In A. Meadows (Ed.), *Qualitative inquiries in music therapy: A monograph series*. Gilsum, NH: Barcelona Publishers

Bonde, L.O. (2007b). Music as co-therapist. Investigations and reflections on the relationship between music and imagery in the Bonny method of guided imagery and music. In I. Frohne-Hagemann (Ed.), *Receptive music therapy: Theory and practice*. Wiesbaden, Germany: Zeitpunkt Musik.

Bonny, H.L. (1969). *Notes on music for the LSD experience*. Unpublished Notes, March 7, 1969.

Bonny, H.L. (1978a/2002). Facilitating guided imagery and music sessions. In L. Summer (Ed.), *Music and consciousness: The evolution of guided imagery and music* (pp. 269-298). Gilsum, NH: Barcelona Publishers.

Bonny, H.L. (1978b/2002). The role of taped music programs in the guided imagery and music process. In L. Summer (Ed.), *Music and consciousness: The evolution of guided imagery and music* (pp. 299-324). Gilsum, NH: Barcelona Publishers.

Bonny, H.L. (1979/2002). Guided imagery and music: Mirror of consciousness. In L. Summer (Ed.), *Music and consciousness: The evolution of guided imagery and music* (pp. 93-102). Gilsum, NH: Barcelona Publishers.

Bonny, H.L. (1980/2002). The early development of guided imagery and music (GIM). In L. Summer (Ed.), *Music and consciousness: The evolution of guided imagery and music* (pp. 54-68). Gilsum, NH: Barcelona Publishers.

Bonny, H.L. (1989/2002). Sound as symbol: Guided imagery and music (GIM) in clinical practice. In L. Summer (Ed.), *Music and consciousness: The evolution of guided imagery and music* (pp. 132-140). Gilsum, NH: Barcelona Publishers.

Bonny, H.L. (1993/2002). Body listening: A new way to review the GIM tapes. In L. Summer (Ed.), *Music and consciousness: The evolution of guided imagery and music* (pp. 325-334). Gilsum, NH: Barcelona Publishers.

Bonny, H.L. (2001/2002). Music and spirituality. In L. Summer (Ed.), *Music and consciousness: The evolution of guided imagery and music* (pp. 175-184). Gilsum, NH: Barcelona Publishers.

Bonny, H.L. & Keiser-Mardis, L. (1994). *Music resources for GIM facilitators: Core programs and discography of core programs*. Olney, MD: Archedigm Publications.

Bonny, H.L. & Pahnke, W. (1972/2002). The use of music in psychedelic (LSD) psychotherapy. In L. Summer (Ed.), *Music and consciousness: The evolution of guided imagery and music* (pp. 20-41). Gilsum, NH: Barcelona Publishers.

Bonny, H.L. & Savary, L.M. (2004). *Music and your mind: Listening with a new consciousness*. St. Louis, MO: MMB Music, Inc.

Bruscia, K. (1991). Embracing life with AIDS: Psychotherapy through guided imagery and music (GIM). In K. Bruscia (Ed.), *Case studies in music therapy*. Gilsum, NH: Barcelona Publishers.

Bruscia, K. (1996) *Music for the imagination (CD set)*. Gilsum, NH: Barcelona Publishers.

Bruscia, K. (1998a). *Defining music therapy*. (2<sup>nd</sup> Edition) Gilsum, NH: Barcelona Publishers.

Bruscia, K. (1998b). An introduction to music psychotherapy. In K. Bruscia (Ed.), *The dynamics of music psychotherapy* (pp. 1-16). Gilsum, NH: Barcelona Publishers.

Bruscia, K. (1998c). Techniques for uncovering and working with countertransference. In K. Bruscia (Ed.), *The dynamics of music psychotherapy*. Gilsum, NH: Barcelona Publishers.

Bruscia, K. & D. Grocke. (2002). *Guided imagery and music: The Bonny method and beyond*. Gilsum, NH: Barcelona Publishers.

Bruscia, K. (2002a). The boundaries of guided imagery and music and the Bonny method. In K. Bruscia & D. Grocke (Eds), *Guided imagery and music: The Bonny method and beyond* (pp. 37-62). Gilsum, NH: Barcelona Publishers.

Bruscia, K. (2002b). Developments in music programming for the Bonny method. In K. Bruscia & D. Grocke (Eds.), *Guided imagery and music: The Bonny method and beyond* (pp. 307-316). Gilsum, NH: Barcelona Publishers.

Bruscia, K. (2003). *Basic guiding interventions*. Unpublished educational handout. Philadelphia, PA: Temple University.

Bruscia, K. (2005a). Designing qualitative research. In B.L. Wheeler (Ed.), *Music therapy research*. Second edition (pp. 129-137). Gilsum, NH: Barcelona Publishers.

Bruscia, K., Abbott, E., Cadesky, N., Condrón, D. McGraw Hunt, A., Miller, D., & Thomae, L. (2004) A collaborative heuristic analysis of Imagery-M: A classical music program used in the Bonny method of guided imagery and music (BMGIM). In A. Meadows (Ed.) *Qualitative inquiries in music therapy: A monograph series*. Gilsum, NH: Barcelona Publishers.

Bunt, L. (2000). Transformational processes in guided imagery and music. *Journal of the Association for Music and Imagery*, 7, 44-58.

Burns, D. S. (2000). The effect of classical music on absorption and control of mental imagery. *Journal of the Association for Music and Imagery*, 7, 34-43.

Clark, M. (1998). The Bonny method of guided imagery and music and spiritual development. *Journal of the Association for Music and Imagery*, 6, 55-62.

Cohen, N. (2003-04). Musical choices: An interview with Helen Lindquist Bonny. *Journal of the Association for Music and Imagery*, 9, 1-26.

Creswell, J.W. (1998). *Qualitative inquiry and research design: Choosing among five traditions*. Thousand Oaks, CA: Sage Publications.

Frohne-Hagemann, I. Receptive music therapy: An introduction. In I. Frohne-Hagemann (Ed.), *Receptive music therapy: Theory and practice*. Wiesbaden, Germany: Zeitpunkt Musik

Gadamer, H.G. (1977). *Philosophical hermeneutics* (D. E. Linge, Ed., Trans.). Berkeley and Los Angeles, CA: University of California Press.

Garred, R. (2001). The ontology of music in music therapy: A dialogical view, *Voices: A World Forum for Music Therapy*. Retrieved December 6, 2006 from [http://www.voices.no/mainissues/Voices1\(3\)Garred.html](http://www.voices.no/mainissues/Voices1(3)Garred.html).

Garrad, R. (2006). *Music as therapy: A dialogical perspective*. Gilsum, NH: Barcelona Publishers.

Geiger, E. M. (2007). The guide-traveller relationship in BMGIM. In I. Frohne-Hagemann (Ed.) *Receptive music therapy: Theory and practice*. Wiesbaden, Germany: Zeitpunkt Musik.

Goldberg, F. (1992). Images of emotion: The role of emotion in guided imagery and music. *Journal of the Association for Music and Imagery*, 1, 5-18.

Goldberg, F. (1995). The Bonny method of guided imagery and music. In T. Wigram, B. Saperston, & R West. (Eds.), *The art and science of music therapy: A handbook*. Amsterdam, The Netherlands: Harwood Academic Publishers.

Goldberg, F. (2002). A holographic field theory model of the Bonny method of guided imagery and music (BMGIM). In K. Bruscia & D. Grocke (Eds.), *Guided imagery and music: The Bonny method and beyond* (pp. 359-378). Gilsum, NH: Barcelona Publishers.

Gouk, P. (2000). Objective science or just a metaphor? The 'Iso' principle of Ira Altshuler. *Nordic Journal of Music Therapy*, 10 (1), p. 65-68.

Grocke, D.E. (1999). A phenomenological study of pivotal moments in guided imagery and music (GIM) therapy. Doctoral dissertation, University of Melbourne; Melbourne, Australia.

Grocke, D. (1999a). The music which underpins pivotal moments in guided imagery and music. In T. Wigram & J. DeBacker (Eds.), *Clinical applications of music therapy in psychiatry* (pp. 197-210). London, England: Jessica Kingsley Publishers Ltd.

Grocke, D. (1999b). Pivotal Moments in guided imagery and music. In J. Hibben (Ed.), *Inside music therapy: Client experiences*. Gilsum, NH: Barcelona Publishers.

Grocke, D. (2002a). The evolution of Bonny's music programs. In K. Bruscia & D. Grocke (Eds.), *Guided imagery and music: The Bonny method and beyond* (pp. 85-98). Gilsum, NH: Barcelona Publishers.

Grocke, D. (2002b). The Bonny music programs. In K. Bruscia & D. Grocke (Eds.), *Guided imagery and music: The Bonny method and beyond* (pp. 99-136). Gilsum, NH: Barcelona Publishers.

Grocke, D. (2007). A structural model of music analysis. In T. Wosch & T. Wigram (Ed.), *Microanalysis in music therapy: Methods, techniques and applications for clinicians, researchers, educators and students*. London, England: Jessica Kingsley Publishers.

Hahna N.D. & Borling, J.E. (2003). The Bonny method of guided imagery and music (BMGIM) with intimate partner violence (IVP). *Journal of the Association for Music and Imagery*, 9, 41-58.

Hibben, J. (1999). *Inside music therapy: Client experiences*. Gilsum, NH: Barcelona Publishers.

Isenberg-Grzeda. (1999). Experiencing the music in guided imagery and music. In J. Hibben (Ed.), *Inside music therapy: Client experiences*. Gilsum, NH: Barcelona Publishers.

Johnson, M. (2007). *The meaning of the body: Aesthetics of human understanding*. Chicago, IL: University of Chicago Press, 2007.

Kasayka, R. (1991). *To meet and match the moment of hope: Transpersonal elements of the GIM process*. UMI Dissertation Services, No. 9134754, New York University.

Keiser-Mardis, L.H. (1978). *Guiding a trained musician in a GIM session*. Unpublished educational handout. Baltimore, MD: Institute for Music and Imagery.

Kenny, C.B., Jahn-Langenberg, & Loewy, J. (2005). Hermeneutic inquiry. In B.L. Wheeler (Ed.) *Music therapy research*. Second edition (pp. 416-428). Gilsum, NH: Barcelona Publishers.

Kreitler H. & Kreitler, S. (1972). *Psychology of the arts*. Durham, NC: Duke University Press.

Kvale, S. (1996). *InterViews*. Thousand Oaks, CA: Sage Publications.

Lamb. G.M. (October 15, 1999). To enjoy music, stop to really listen. *Christian Science Monitor*, 18.

Lewis, K. (1998-99). The Bonny method of guided imagery and music: Matrix for transpersonal experience. *Journal of the Association for Music and Imagery*, 6, 63-86.

Loewy, J.V. (1995). A hermeneutic panel study of music therapy assessment with an emotionally disturbed boy. Doctoral dissertation, New York University, 1994. *Dissertation Abstracts International*, 55(09), 2631.

Marr, J. (2001). The effects of music on imagery sequence in the Bonny method of guided imagery and music. *The Australian Journal of Music Therapy*, 12, 39-45.

Mårtensson-Blom, K. (2008, September). *Subjectivity, intersubjectivity, and the process of surrender*. Paper presented at the Eighth European Guided Imagery and Music Conference, Fevik, Norway.

McKinney, C.H. (1990). The effect of music on imagery. *Journal of Music Therapy*, 27, 34-46.

McKinney, C.H. & Tims, F.C. (1995). Differential effects of selected classical music on the imagery of high versus low imagers: Two studies. *Journal of Music Therapy*, 32(1), p. 22-45.

Moffitt, L. & Hall, A. (2003-04). New grown with pleasant pain (Keats): Recovering from sexual abuse with the use of the Bonny method of guided imagery and music and the use of poetry. *Journal of the Association for Music and Imagery*, 9, 75-78.

Mozart, W.A. Sonata in A major, Koechel 331. In *Sonatas and Three Fantasias for Piano, Volume II* (pp. 125-131). New York: Edwin F. Kalmus Publishing Company.

Newell, A. (1999). Dealing with physical illness: Guided imagery and music and the search for self. In J. Hibben (Ed.), *Inside music therapy: Client experiences*. Gilsum, NH: Barcelona Publishers.

Nolan, P. (1989). Music therapy improvisation techniques with bulimic patients. In L.M. Hornyak & E.K. Baker (Eds.), *Experiential therapies for eating disorders*. New York, NY: Guilford Press.

Pederson, I.N. (1997). The music therapist's listening perspectives as a source of information in improvised musical duets with grown-up psychiatric patients suffering from schizophrenia. *Nordic Journal of Music Therapy*, 6(2), 98-111.

Pederson, I.N. (2006). Countertransference in music therapy. Doctoral dissertation. Institute for Music and Music Therapy, Aalborg University, Denmark.

Pellitteri, J. (1998). A self-analysis of transference in guided imagery and music. In K. Bruscia (Ed.), *The dynamics of music psychotherapy* (pp. 481-490). Gilsum, NH: Barcelona Publishers.

Polkinghorne, D.E. (1988). *Narrative knowing and the human sciences*. Albany, NY: State University of New York Press.

Robson, C. (2002). *Real world research: A resource for social scientists and practitioner-researchers*. Oxford, UK: Blackwell Publishing.

Ruud, E. (1996). Interpretation and epistemology in music therapy: Dealing with competing claims of knowledge. In M. Langenbert, K. Aigen, & J. Frommer (Eds.), *Qualitative music therapy research* (pp. 225-230). Gilsum, NH: Barcelona Publishers.

Sarbin, T.R. & Juhasz, S. (1970). Toward a theory of imagination. *Journal of Personality*, 38, p. 52-76.

Sheehan, P. (1967). A shortened form of Betts' questionnaire upon mental imagery. *Journal of Clinical Psychology*, 23, p. 386-387.

Schulberg, C. H. (1999). Out of the ashes: Transforming despair into hope with music and imagery. In J. Hibben (Ed.), *Inside music therapy: Client experiences*. Gilsum, NH: Barcelona Publishers.

Segal, H. (1974). *Introduction to the work of Melanie Klein*. New York, NY: Basic Books.

Short, A.E. (1996-97). Jungian archetypes in guided imagery and music therapy: Approaching the client's fairytale. *Journal of the Association for Music and Imagery*, 5, 37-50.

Short, A.E. and William. (1999). Review of guided imagery and music sessions: William's story. In J. Hibben (Ed.), *Inside music therapy: Client experiences*. Gilsum, NH: Barcelona Publishers.

Skaggs, R. (1992). Music as co-therapist: Creative resource for change. *Journal of the Association for Music and Imagery*, 1, 77-84.

Smaling, A. (2003). Inductive, analogical, and communicative generalization. *International Journal of Qualitative Methods*, 2(1). Article 5. Retrieved 12-1-08 from [http://www.ualberta.ca/~iiqm/backissues/2\\_1/html/smaling.html](http://www.ualberta.ca/~iiqm/backissues/2_1/html/smaling.html)



Smeijsters, H. (1997). *Multiple perspectives: A guide to qualitative research in music therapy*. Gilsum, NH: Barcelona Publishers.

Stige, B. (1999). The meaning of music – from the client's perspective. In T. Wigram & J. De Backer (Eds.), *Clinical applications of music therapy in psychiatry*. London, England: Jessica Kingsley Publishers

Stokes, S.J. (1992). Letting the sound depths arise. *Journal of the Association for Music and Imagery*, 1, 69-76.

Summer, L. (1981). Guided imagery and music with the elderly. *Music Therapy: Journal of the American Association for Music Therapy*, 1, 39-42.

Summer, L. (1983). *The effect of music upon involvement in imagery*. Unpublished masters thesis. Hahnemann University (Drexel University).

Summer, L. (1988). *Guided imagery and music in the institutional setting*. MMB Music: St. Louis, MO.

Summer, L. (1989a). *Basic guiding skills (The essence of guiding: Guiding 101)*. Unpublished level I training materials. Salina, KS: Bonny Foundation, An Institute for Music-centered Therapies.

Summer, L. (1989b). *Advanced guiding skills (guiding 201)*. Unpublished level II training materials. Salina, KS: Bonny Foundation, An Institute for Music-centered Therapies.

Summer, L. (1992). Music: The aesthetic elixir. *Journal of the Association for Music and Imagery*, 1, 43-54.

Summer, L. (1994). Considering classical music for use in psychiatric music therapy. *Music Therapy Perspectives*, 12, p. 130-133.

Summer, L. (1995). Melding musical and psychological processes. *Journal of the Association for Music and Imagery*, 4, 37-48.

Summer, L. (1998). The pure music transference in guided imagery and music (GIM). In K. Bruscia (Ed.), *The dynamics of music psychotherapy* (pp. 431-460). Gilsum, NH: Barcelona Publishers.

Summer, L. (2002). Group music and imagery therapy: An emergent music therapy. In K. Bruscia & D. Grocke (Eds.), *Guided imagery and music: The Bonny method and beyond* (pp. 297-306). Gilsum, NH: Barcelona Publishers

Summer, L., & Chong, H.J. (2006). Music and imagery techniques with an emphasis on the Bonny method of guided imagery and music. In H.J. Chong (Ed.), *Music therapy: Techniques, methods, and models*. (Korean language). Seoul, Korea: Hakjisa Publishing Company.

Thöni, M. (2002). Guided imagery and music in fifty minute sessions: A challenge for both patient and therapist. *Nordic Journal of Music Therapy*, 11(2), 182 -188

Trondalen, G. (2003). “Self-listening” in music therapy with a young woman suffering from anorexia nervosa. *Nordic Journal of Music Therapy*, 12(1), 3-17.

Tüpkér, R. Listening to music as “Gestalt.” In I. Frohne-Hagemann (Ed.), *Receptive music therapy: Theory and practice*. Wiesbaden, Germany: Zeitpunkt Musik.

Vaux, D.R. (1993). Guided imagery and music applied to the fifty minute hour. *Journal of the Association for Music and Imagery*, 2, 29-34.

Ventre, M. (2002). The individual form of the Bonny method of guided imagery and music. In K. Bruscia & D. Grocke (Eds.), *Guided imagery and music: The Bonny method and beyond* (pp. 29-36). Gilsum, NH: Barcelona Publishers

Wheeler, B. (1983). A psychotherapeutic classification of music therapy practices: A continuum of procedures. *Music Therapy Perspectives*, 1(2), 8-12.

Wigram, T., Pedersen, I.N., & Bonde, L.O. (2002). *A comprehensive guide to music therapy: Theory, clinical practice, research and training*. London, England: Jessica Kingsley Publishers.

Winnicott, D.W. (1969). The theory of the parent-infant relationship. *International Journal of Psychoanalysis*, 50, 711-717.

Yalom, I.D. (1985). *Theory and practice of group psychotherapy* (3<sup>rd</sup> ed). NY, NY: Basic Books.

Wrangsjö, B. (1994). Psychoanalysis and guided imagery and music: A comparison. *Journal of the Association for Music and Imagery*, 3, 35-48.

(n.d.). Retrieved January 7, 2008, from [http://www.noetic.org/about/what\\_is.cfm](http://www.noetic.org/about/what_is.cfm)

## Chapter 12: Appendices

### Appendix A: Description of music programs

The following is a description of each piece of music utilized in the music programs in this research study. For each piece, I have given an informal description of the musical and psychological processes that I perceived in each piece during a concentrated listening at the conclusion of the six GIM sessions. The music description is not a formal phenomenological analysis, nor is it a phenomenological description. This type of musical/psychological description is identified and explained in *Melding Musical and Psychological Processes* (Summer, 1995) a prior publication in Chapter One.

#### Hillary's Music Program

Faure *Pavane*

Debussy *String Quartet, Andantino*

Copland *Rodeo, Corral Nocturne*, 4 hearings

The Faure *Pavane* is in ABA form. The A section is straightforward and calm with a homogenous pizzicato accompaniment by the strings; above it is a prosaic melodic line, played by the flute. There is little tension in this section, and there is a sense that there is nowhere else to go. The B section changes the mood and there is a dramatic turn away from the sense of calm. The strings seem to be interrupting with arguments while the inner voice, a horn solo, seems to be attempting to hold its calming influence. Then the A section appears again almost before the B section gets to fully express itself. This early introduction turns into a transition after which the pavane returns more fully for the ending. Whereas the internal voice of the horn calmed the disagreement of the strings in the B section, in the return of the A section the disagreement of the strings is placed on top of the pavane, as if to respond to the horn's attempt to calm them down in the B section. At the end, there is a reduction, to absurdity, of the pavane where there is almost nothing of it left; it is completely simplified in the final measures of the piece. The intriguing element in this piece is not the melody, nor the pizzicato strings, nor any other element in its foreground. What makes this piece so beautiful are the odd internal lines that stand out against the otherwise familiar elements. Faure draws our attention to these secondary lines through his orchestration – by using the unusual timbres of horn and bassoon. They are not lyrical, in fact, they are jagged; but the interest, the depth, of this piece is in its internal lines. They sing of a different, a second, level of thought process going on. The beautiful life that is the *Pavane* is unexamined and plain, until you examine it and find its depth. Faure seems to say, underneath, there is something more than the unquestioned life.

The *Andantino* movement of Debussy's *String Quartet* represents an exploration of the continuous melody concept of Wagner in which structure is subsumed by the concept of linearity – linear motion through time. At all times the quartet seems to be expressing only one continuous thought, or narrative, and there are long spaces before the next narrative proceeds. Each long monologue leads to the next and moments of resolution happen when the narrative reaches a height, with the use of block chords for emphasis. There is no real structural contrast in the development of the movement; however, in one section Debussy uses a procedure in which he

chops the melody into fragments. The accompaniment is a further cutting of the melodic fragment, and this cutting procedure results in a frenzied section in which he expresses the melodic elements in a more and more compacted form. There is a frantic feeling as the listener is hearing the melody compressed into shorter and shorter amounts of time until Debussy allows the violin to return to a full presentation of the melody. The magical element in this movement is Debussy's ability to create the feeling of four instruments as a singular voice. The quartet seems to be a single unit with a narrow focus. There is no real counterpoint or independence of line. Each line is completely dependent, and is pulled along with, and reflective of, the one singular voice.

The *Corral Nocturne* from the ballet, *Rodeo* creates a nocturnal feeling through the use of ambiguity, slow tempo, and sparse writing. Copland's main strategy is to present block harmonies in chords of equal beats. A chord is presented, then another chord; every chord comes in its place. In addition to this strategy, he also eliminates the concept of harmonic motion. Although he presents sequences of chords, there is not a harmonic sequencing of chords since he resolves any harmonic dissonance immediately (within two to four beats). Even the introduction of a brass chorale does not break this feeling of harmonic stasis; it still follows the same structure. With so little harmonic tension, there is a feeling that there is no far future, everything is at hand. Copland seems to be able to dispense with time altogether.

### **John's Music Program**

Rodrigo *Concierto de Aranjuez*, movement 2, 2 hearings

The *second movement* of Rodrigo's *Concierto de Aranjuez*, inspired by a palace in Aranjuez, is about memory. Rodrigo depicts another time and place by beginning with a recollection of a theme embellished by the guitar player. We identify with the guitar player, and his embellishments make us aware of the personal nature of our reflection because they are improvisational. The continuously developing ornamentations are the defining element of this piece because they are so unpredictable. For example, Beethoven develops his themes and ornaments in a predictable way (for example breaking down his themes from eight notes to four, from four notes to two, from two notes to one), but Rodrigo has no such organized development. As the guitar and orchestra dialogue back and forth; it seems that the guitar reflections can take a short or long time, and the sense is that the orchestra can come in at any time. The guitar player, and the orchestra, seem to embellish with reiterated notes that can be repeated and/or held for any amount of time, and they can occur at any time. No matter how many times one listens to this piece, it is still difficult to remember it exactly because we are denied the aspect of predictability. His use of unpredictable, improvisatory embellishments make it clear that this piece is about the past, and bringing our own responses – in the present – to it. They place us, the listener, firmly in the present, reflecting upon the past. In fact, Rodrigo seems to have written this piece not about itself, but rather, it seems to be a recollection of themes from a piece of the past. More than halfway through the movement, in the 6/8 section, there is, for the first time, an unaltered remembrance of the actual piece Rodrigo seems to be portraying. This is reconstructed in his memory in a long cadenza which leads to a strong statement of the theme, still embellished. He ends the piece in the midst of its own development by cutting the theme

down to its smallest core element: a turn. Then he offers a simple ending chord as a surprising conclusion to the movement. The musician's fingers moving on the guitar strings is clearly audible in the recording used for this study which strengthens the presence of the guitar player, increases our sense of identification with him, and it adds to the feeling that the music is in the present.

### **Nancy's Music Program**

Wagner *Siegfried Idyll*

Mozart *Vesperae Solemnes, Laudate Dominum*, 3 hearings

The *Siegfried Idyll* by Wagner is a journey, and it is a very safe journey. The evidence of this is everywhere in the piece, especially in its one-measure motive which seems to reflect how much it wants to stay home, and safe. Of the four beats of the theme, 2 ½ beats are completely consonant, after which it moves slightly away but immediately hurries, with a triplet, right back home. It is a many layered piece, filled with the overlapping development of musical material throughout. Harmonically, the piece is quite adventurous, yet it is characterized by suspensions that are resolved simply, and all dissonances are resolved without jarring the listener. The melodic element is quite prominent and it is continuously evolving, always with countermelodies underneath it. The piece ventures far from its home base, yet it contains so many holding elements that no matter how harmonically adrift it becomes, there is always a feeling of having the comfort of home. One contrasting section is initiated by a striking horn call that leaps about in fourths and fifths; but despite this, it leaps in a consonant manner, jumping, but going nowhere. And although there are chaotic string passages, they all rush back to the comfort of familiar territory. This piece is no frightening travel; rather, it is a sojourn in which the traveler has packed all the comforts of home.

In the *Vesperae Solemnes, Laudate Dominum*, Mozart includes sections with solo voice, chorus, and in the orchestra he juxtaposes several layers of musical material. First, there is the slow moving harmony. This relaxed harmonic motion provides safety, but there is a heavy, pushing bass which is constantly surging. And there is a contrasting hyperactive accompaniment in the violas and second violins that provides a kind of internal, arpeggiated churning. The plain melody and the slow moving harmony provide a sense of calm holding while the layers of churning in the internal accompaniment and the surging bass create depth. The piece is a remarkable integration of calm and depth.

### **Deval's Music Program**

Bach (orchestrated) *Prelude in Eb minor*

Beethoven *Violin Concerto, movement 2*, 2 hearings

Mascagni *Cavalleria Rusticana, Regina Coeli*

Canteloube *Songs of the Auvergne, Brezairola*, 3 hearings

Bach (orchestrated) *Prelude in Eb minor* begins by creating a feeling of safety and harmonic stasis and moves very far afield from its home base. Initially, the piece raises normal expectations. However, Bach takes shocking harmonic directions with his use of sophisticated

dissonance and resolutions. The piece has a pavane-feel to it, but it becomes multilayered, dense, and deep. The bass is always moving, changing, and has complete independence. The piece moves in directions that are so unexpected and beautiful that they feel satisfying, even though they are challenging. Whereas the beginning feels like being gently guided down a path, the piece reveals inner and tense difficulties and odd perspectives through its unresolved, or unexpected, resolutions. In fact, upon re-examination of the piece, the listener can find that they were actually all implied in the beginning.

The beginning of the *second movement* of the Beethoven *Violin Concerto* establishes two levels of experience: whereas orchestra is playing out the piece on the first level, Beethoven gives the violin soloist a strange, ethereal accompaniment that is placed so high above the orchestra that it seems to be displaced (almost the whole movement is played on the violinist's high E string). The long orchestral parts make it clear that the violin is involved more as accompaniment than as a soloist. And not only is the violin in an exceptionally high register, but for the majority of the movement Beethoven separates the soloist from the orchestra in a unique way. In most concerti there is a feeling of balance, of give and take, between the soloist and the orchestra. But, initially Beethoven does not even attempt to establish any feeling of balance. The orchestra takes the melody, harmony and accompaniment and the violin simply embellishes in the manner of an observer who comments, but does not affect, the proceedings. After an extended period of commenting, the violin becomes more integrated and finally takes the lead role in the B section, yet it is ambiguous – it seems to take action, but the action is unclear. In the end, when the A section returns again, the violin is clearly leading with unambiguous action. Interestingly, when the violin observer turns leader, the rest of the strings seem to take up the more detached role with their high, pizzicato accompaniment.

From the opera, *Cavalleria Rusticana*, this choral section, *Regina Coeli*, is an aesthetic and religious depiction of the accepting arms of Mary, mother of Jesus. Overall, the piece feels like a long, extended crescendo; very secure, always building upon itself: a gradual and sure ascent into mothering arms. Mascagni uses many strategies for this ascent. First of all, there is no use of contrasting elements; all musical elements work together. Almost all of the harmonic motion is sequential and stepwise, with little dissonance. Chords move in blocks and in expected ways; and since these consonant chords are often reiterated in triplets rather than simply held, the feeling of consonance is reinforced even further. The piece features canonic entrances of male and female chorus and solos and their melodic lines are often doubled by instruments. A main feature of the crescendo build is the use of sequences which are almost always ascending and, near the end, also quicken. It seems that Mascagni is trying to show an all-embracing and intense ascension into the arms of one's spiritual mother.

This song, *Brezairola*, from Canteloube's *Songs of the Auvergne*, has all the elements of a children's song: it has a narrowed vocal range, repetitive pitch material, is repetitious in its structure, and its text is made up of simplified vocal sounds which assure the listener that everything will be fine. In fact, it is a lullaby and Canteloube creates a distinct feeling of rocking in the accompaniment by alternating the bass and upper lines using a sing-song, back and forth, motion. This rocking motion creates the sense of being held, of staying in one place. He steps away from this stasis only by repeating the song in different harmonic areas. Throughout, he utilizes string harmonics as an effect which adds to the simple, child-like feeling of the piece.

### Michelle's Music Program

Beethoven *Piano Concerto #5*, movement 2, 3 hearings

Schumann *Fünf Stücke im Volkston*, *Langsam*

Even before the piano enters, the *second movement* of the Beethoven *Piano Concerto #5*, establishes a sense of gentle solidity. The solidity can be found in the back and forth outlining of chords, the solid foundation in the lower strings, and in its sostenuto chords held by the winds. Even in transitional sections (for example, one with extended, long sequential trills) when the direction is ambiguous, the musical material is presented so assuredly that each step of the transition is felt to be clear and safe – there is no question that its destination will be a safe one. Even the exploratory piano part is comfortable. The few elements of disorder, for example, piano passages with broken octaves and sequences of modulations within a transitional section, always end in an affirmation of order. The piece has a kind of regularity, an almost mechanical simplicity that seems to reflect confidence in the laws of nature, a feeling of obeying a universal order. To end, the piano plays the fragmented melody and it transmogrifies into a chord: it becomes one with itself and everything is in agreement. Certainly, this movement has no doubts about its strength.

Schumann's *Fünf Stücke im Volkston*, *Langsam* movement sounds like it could be a simple folk tune, or even a model for the Brahms *Lullaby* because of its feeling of holding and reassurance. It is a very ordered piece with a child-like simplicity and range, with strong, steady quarter note chordal accompaniment. When the A section returns there is a dual assurance when the piano takes the melody and the cello has a consonant countermelody. Although there is a

### Bill's Music Program

Respighi *Pines of Rome*, *Gianicolo*

Strauss *Death and Transfiguration*, *Transfiguration*

Brahms *Symphony #3*, movement 3, 2 hearings

Debussy *Danses Sacred and Profane*

Faure *Pavane*

Respighi's *Pines of Rome*, *Gianicolo* movement begins with an impressionistic ambiguity, and no harmonic motion whatsoever. After a few minutes the piece becomes more grounded and more harmonically directional. It is the timbres that Respighi uses that make this piece beautiful. He uses a basic palette of sustained strings with woodwinds and keyboards, along with harp to create a multilayered timbre and celestial-sounding chord changes. The end of this piece includes an actual recording of bird sounds written into the score. Since this piece is an expression of the sounds of the pines and other nature sounds with orchestral timbres, it is interesting that, at its end, Respighi chooses to illustrate the sounds of birds with an actual recording. He seems to step over his own idea of expressing nature through the orchestra in favor of a recording of the thing itself. In any case, his invention presaged the use of recorded effects in contemporary music.

The *Transfiguration* section of Strauss's *Death and Transfiguration* is made up of sustained phrases that evolve slowly and constantly yet stay close to home thematically. This section is based upon a simple melodic idea: a gently dissonant suspension that drops a major second to consonance on the first beat of the measure. This is repeated over and over again, and each time it is gentle and satisfying. The evolution of the piece involves little dissonance, a slow tempo, and at its end, the cadence is repeated reassuringly.

The *third movement* of Brahms' *Third Symphony* is a sophisticated, multilayered piece of music in which Brahms explores meter and rhythm. It is a minuet, a dance, but its bar lines are constantly disappearing. The theme grows, not only through melodic changes, but through his distinctive use of all the musical elements, including timbre. Brahms has blended his orchestra together so beautifully that even interesting timbral effects serve to reinforce the full orchestral color as a whole. For example, the beautiful horn solo in this movement soars above the orchestra, yet it still feels integrated into the orchestral gestalt.

Debussy *Dances Sacred and Profane* is a piece for orchestra and harp in which Debussy explores the idiosyncratic use of the solo harp with extended glissandi and guitar-like passages. His use of divided strings creates a lushness to the piece and adds to the ambiguity of his musical language. Tonally, the piece is very ambiguous, and the musical space is very dense. It seems to float over the ground because it alternates back and forth between chords without a feeling of polarity or tendency or attraction to a particular tonic and his alternation between harp and string passages contribute to its ungrounded, exploratory nature.

The Faure *Pavane* is in ABA form. The A section is straightforward and calm with a homogenous pizzicato accompaniment by the strings; above it is a prosaic melodic line, played by the flute. There is little tension in this section, and there is a sense that there is nowhere else to go. The B section changes the mood and there is a dramatic turn away from the sense of calm. The strings seem to be interrupting with arguments while the inner voice, a horn solo, seems to be attempting to hold its calming influence. Then the A section appears again almost before the B section gets to fully express itself. This early introduction turns into a transition after which the pavane returns more fully for the ending. Whereas the internal voice of the horn calmed the disagreement of the strings in the B section, in the return of the A section the disagreement of the strings is placed on top of the pavane, as if to respond to the horn's attempt to calm them down in the B section. At the end, there is a reduction, to absurdity, of the pavane where there is almost nothing of it left; it is completely simplified in the final measures of the piece. The intriguing element in this piece is not the melody, nor the pizzicato strings, nor any other element in its foreground. What makes this piece so beautiful are the odd internal lines that stand out against the otherwise familiar elements. Faure draws our attention to these secondary lines through his orchestration – by using the unusual timbres of horn and bassoon. They are not lyrical, in fact, they are jagged; but the interest, the depth, of this piece is in its internal lines. They sing of a different, a second, level of thought process going on. The beautiful life that is the *Pavane* is unexamined and plain, until you examine it and find its depth. Faure seems to say, underneath, there is something more than the unquestioned life.



## Appendix B: Categorization of music programs

A technique of extemporaneous music programming (Bruscia, 2002b) was utilized to choose the music programs for the six GIM sessions in this study. The following is a categorization of the sixteen pieces of music used in the study. It organizes the pieces into supportive, re-educative, and reconstructive categories. These categories, or levels, of music are identified and explained in two prior publications in Chapter One: *Group Music and Imagery Therapy: Emergent Receptive Techniques in Music Therapy Practice* (Summer, 2002) and *Case Studies in Music and Imagery* (Summer, 2006). The asterisks (\*) signify how many repetitions (each asterisk equals one repetition – therefore, one asterisk equals two hearings of the piece).

### Supportive music

Beethoven *Piano Concerto #5, mvt 2* \*\*  
 Canteloube *Songs of the Auvergne, Brezairola* \*\*  
 Faure *Pavane (used for Hillary and Bill)*  
 Mozart *Vesperae Solemnes, Laudate Dominum*  
 Schumann *Fünf Stücke im Volkston, Langsam*

### Re-educative music

Bach (orchestrated) *Prelude in Eb minor*  
 Brahms *Symphony #3, mvt 3* \*  
 Copland *Rodeo, Corral Nocturne* \*\*\*  
 Debussy *String Quartet, Andantino*  
 Mascagni *Cavalleria Rusticana, Regina Coeli*  
 Strauss *Death and Transfiguration, Transfiguration*

### Reconstructive music

Beethoven *Violin Concerto, mvt 2* \*  
 Debussy *Dances Sacred & Profane*  
 Respighi *Pines of Rome, Gianicolo*  
 Rodrigo *Concierto de Aranjuez, mvt 2* \*  
 Wagner *Siegfried Idyll*



## WebGrid-III *Elicitation*

You are considering 10 elements and 23 constructs in the context of Music-centered [Continue](#)

The constructs Client is not music-centered (during the music)--Client is music-centered (during the music) and The exact pieces I play does not really matter--The exact piece I play really matters are very similar - click here if you want to enter another element to distinguish them [Distinguish](#)

The elements Taking it as music (Meg) and Turning the mallet into a spool (Sh) are very similar - click here if you want to enter another construct to distinguish them [Distinguish](#)

You can elicit another construct using a pair or triad of elements [Pair](#) [Triad](#)

If you want specific elements included, check this box ☐ and select them in the list below

### You can delete, edit, sort, add and show matches among elements

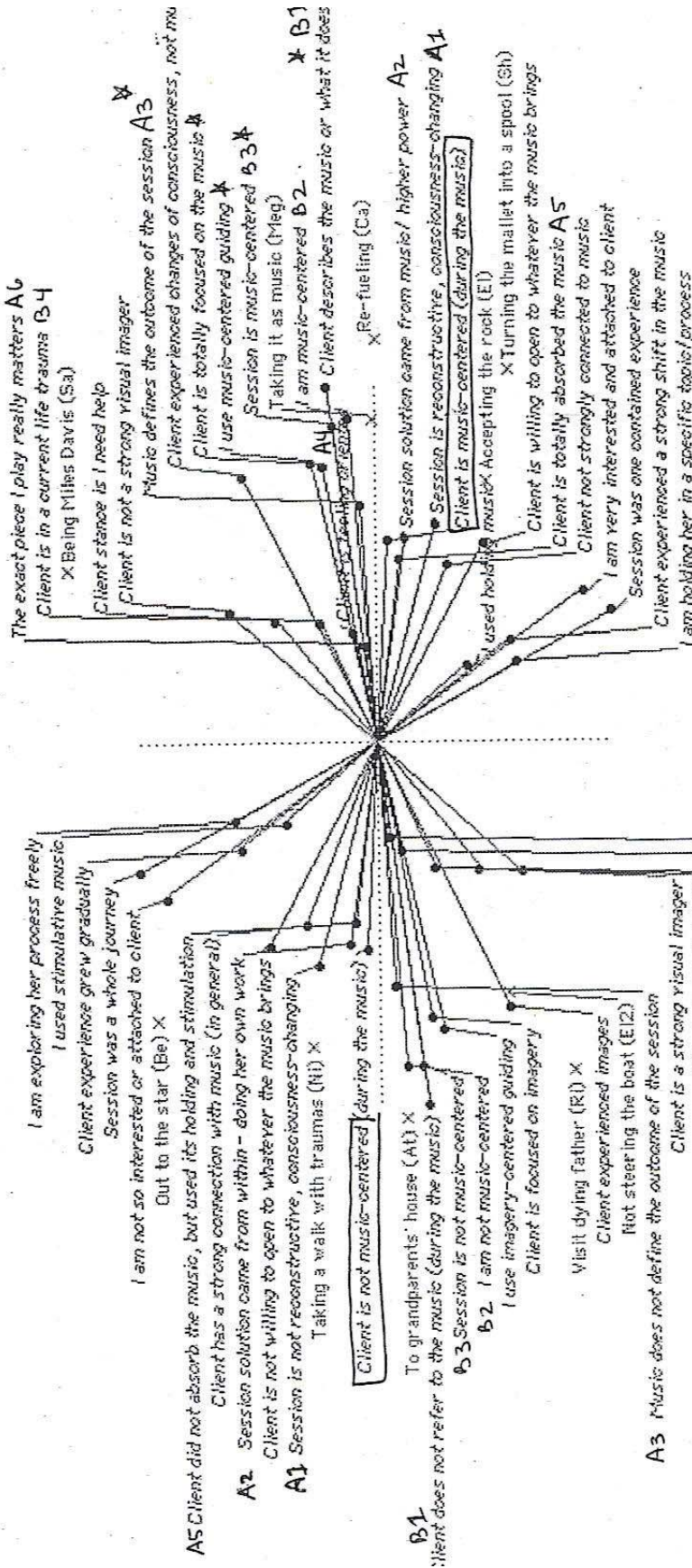
Accepting the rock (El)  
Taking it as music (Meg)  
Turning the mallet into a spool (Sh)  
Re-fueling (Ca)  
Being Miles Davis (Sa)  
To grandparents' house (At)  
Not steering the boat (El2)  
Visit dying father (Ri)  
Taking a walk with traumas (Ni)  
**Out to the star (Be)**

[Delete](#) [Add](#) [Edit](#) [Edit note](#) [Sort](#) [Show matches](#)

### You can delete, edit, sort, add and show matches among constructs

Client does not refer to the music (during the music)--Client describes the music or what it does directly  
Session was one contained experience--Session was a whole journey  
Client is totally focused on the music--Client is focused on imagery  
Music does not define the outcome of the session--Music defines the outcome of the session  
Client is feeling oriented--Client is not feeling oriented (Intellectually defended)  
Session is not reconstructive, consciousness-changing--Session is reconstructive, consciousness-changing  
Client stance is I'm OK--Client stance is I need help  
Client is totally absorbed the music--Client did not absorb the music, but used its holding and stimulation  
Client is not willing to open to whatever the music brings--Client is willing to open to whatever the music brings  
Session solution came from music/ higher power--Session solution came from within - doing her own work  
I used stimulative music--I used holding music  
Client experienced changes of consciousness, not much imager--Client experienced images  
I am not so interested or attached to client--I am very interested and attached to client  
Client experience grew gradually--Client experienced a strong shift in the music  
I am holding her in a specific topic/process--I am exploring her process freely  
Client has a strong connection with music (in general)--Client not strongly connected to music  
I use imagery-centered guiding--I use music-centered guiding  
Client is not a strong visual imager--Client is a strong visual imager  
Client is not in a current life trauma--Client is in a current life trauma  
The exact piece I play really matters--The exact pieces I play does not really matter  
Session is not music-centered--Session is music-centered  
I am music-centered--I am not music-centered  
**Client is not music-centered (during the music)--Client is music-centered (during the music)**

PrinCom Lisa Summer, Domain: GIM  
Context: Music-centered, 10 elements, 23 constructs



(B2) When I am Music-centered, Main related constructs are matched with \*

□ = Main (central) construct  
A1-A6 = Main related constructs  
B1-B4 = Additional related constructs

Appendix 04

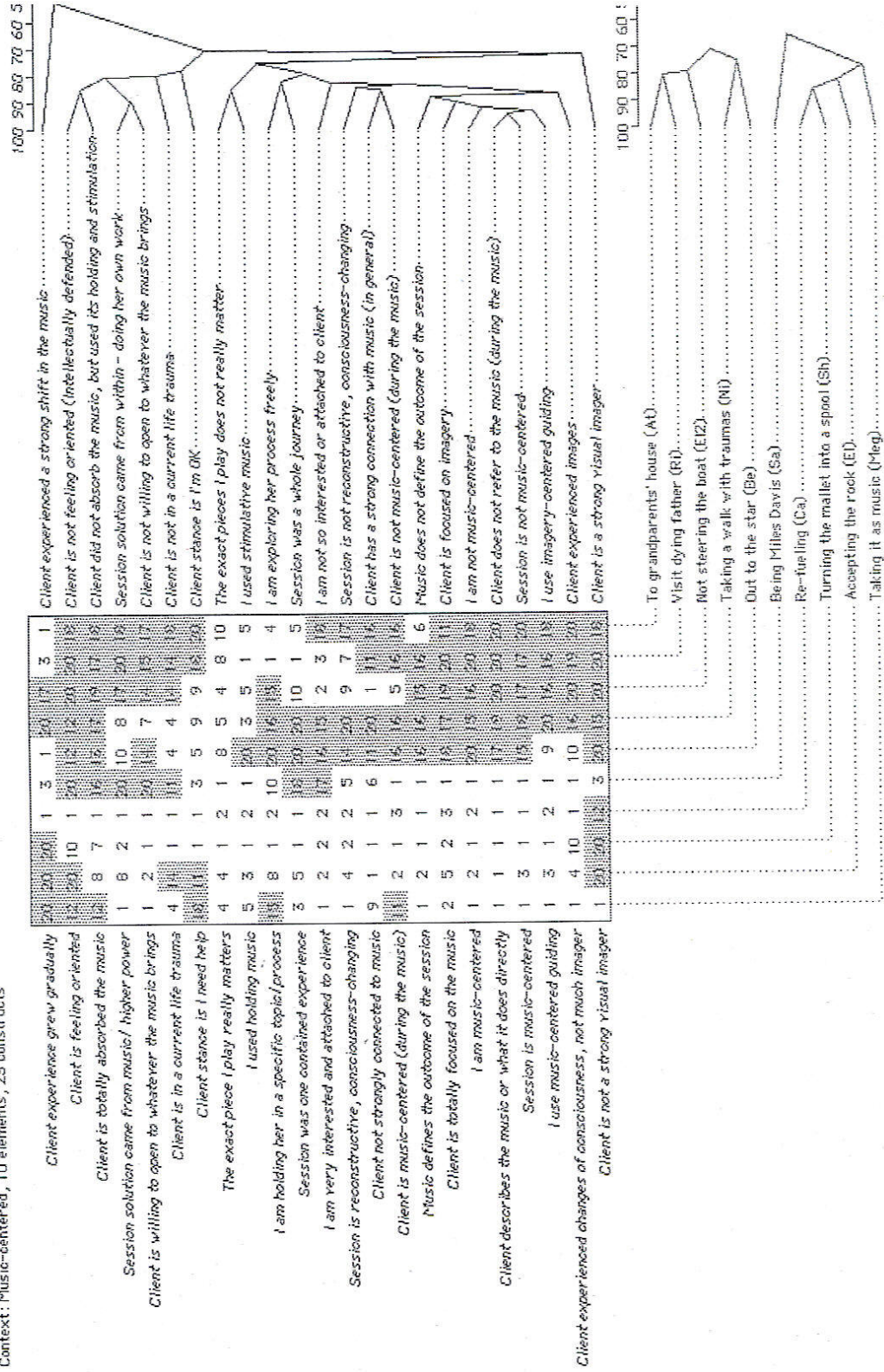


Display Lisa Summer, Domain: GIM  
Context: Music-centered, 10 elements, 23 constructs

Client does not refer to the music (during the music)	20	20	20	20	20	1	1	1	2	4	Client describes the music or what it does directly
Session was one contained experience	5	3	1	1	18	5	10	1	20	20	Session was a whole journey
Client is totally focused on the music	5	2	2	3	1	11	19	20	17	18	Client is focused on imagery
Music does not define the outcome of the session	19	20	20	20	20	15	6	5	5	5	Music defines the outcome of the session
Client is feeling oriented	20	12	10	1	20	18	20	20	12	12	Client is not feeling oriented (Intellectually defended)
Session is not reconstructive, consciousness-changing	17	20	19	19	16	4	12	14	1	7	Session is reconstructive, consciousness-changing
Client stance is I'm OK	10	3	20	20	18	1	12	3	12	16	Client stance is I need help
Client is totally absorbed the music	8	12	7	1	16	18	19	17	17	13	Client did not absorb the music, but used its holding and stimulating
Client is not willing to open to whatever the music brings	19	20	20	20	1	4	7	6	14	7	Client is willing to open to whatever the music brings
Session solution came from music/ higher power	8	1	2	1	20	18	17	20	8	10	Session solution came from within - doing her own work
I used stimulative music	18	16	20	19	20	16	16	20	18	1	I used holding music
Client experienced changes of consciousness, not much imagery	4	1	10	1	1	20	20	19	16	10	Client experienced images
I am not so interested or attached to client	19	20	19	19	4	3	19	18	6	5	I am very interested and attached to client
Client experience grew gradually	20	20	20	1	3	1	17	3	20	1	Client experienced a strong shift in the music
I am holding her in a specific topic/process	8	15	1	2	10	4	15	1	16	20	I am exploring her process freely
Client has a strong connection with music (in general)	20	12	20	20	15	5	20	10	1	10	Client not strongly connected to music
I use imagery-centered guiding	18	20	20	19	20	3	5	5	1	12	I use music-centered guiding
Client is not a strong visual imager	20	1	20	12	3	18	20	20	15	20	Client is a strong visual imager
Client is not in a current life trauma	7	17	20	20	10	3	7	7	17	17	Client is in a current life trauma
The exact piece I play really matters	4	4	1	2	1	10	4	8	5	8	The exact pieces I play does not really matter
Session is not music-centered	18	20	20	20	20	1	4	4	3	6	Session is music-centered
I am music-centered	2	1	1	2	1	18	16	20	15	20	I am not music-centered
Client is not music-centered (during the music)	19	10	20	18	20	5	16	5	5	5	Client is music-centered (during the music)
											Out to the star (Be)
											Taking a walk with traumas (Ni)
											Visit dying father (Ri)
											Not steering the boat (E12)
											To grandparents' house (At)
											Being Miles Davis (Sa)
											Re-fueling (Ca)
											Turning the mallet into a spool (Sh)
											Taking it as music (Meg)
											Accepting the rock (E1)

Appendix 05

FOCUS Lisa Summer, Domain: GIM  
Context: Music-centered, 10 elements, 23 constructs



APPENDIX 06

## Appendix G: Participant consent form

I, \_\_\_\_\_, consent to participate in

1) A 1 ½ hour GIM session. I understand that:

- The session will include verbal discussion that may be about my present life, childhood, and personal issues
- The session may bring up feelings, thoughts, memories, and physical sensations,. Therefore, some emotional discomfort is to be expected, however, I am free to end the session at any time
- I will draw a mandala
- The session will be audiotaped

2) A 2 hour interview. I understand that

- a. The interview will take place after the GIM session, with an adequate break in between
- b. I will be asked to provide my perspective of the music portion of the GIM session
- c. The interview may bring up feelings, thoughts, memories, and physical sessions. Therefore, some emotional discomfort may be expected; however, I am free to end the interview at any time.
- d. I will receive a follow-up telephone call to the interview for additional information. The interview and phone call will be audiotaped.

3) Review. I understand that

- I will be sent a summarized, written version of my interview
- I will be asked to correct this summary and return it to the researcher

I understand that the mandala, audiotapes, and summary report will be utilized for research and publication and that my identity will remain anonymous at all times.

\_\_\_\_\_  
Name (signature)

\_\_\_\_\_  
Date

Please identify the number, and approximate dates, of your prior GIM (or music & imagery) sessions:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ I request a copy of the final case study of my interview.

## Appendix H: Hillary session transcript

### *Faure Pavane*

(How are you experiencing the music?) First I felt really happy with the music, which wasn't what I was feeling previously, it was an immediate reaction. Then I had an image of walking outside in a field of flowers and the feeling of curiosity and looking around. (So really open to that) I'm very aware of how I appear, I don't appear like me, I appear almost like Mary or some sort of biblical character from that time, and I'm pregnant. (How is it?) It's that feeling when you're towards the end of a pregnancy, anticipation, also sort of high on the hormones rushing through your body, just kind of being a little high. (Really feel that with the music, what is this music bringing?) It feels masculine. I can still see that image of myself and that image is seeing in her mind - an image of a large ship on a stormy sea. (It's in her mind) She's thinking about it, it's almost as if it's happening, she's seeing it somewhere. She's seeing it in her mind. It's interesting; both are there at the same time. (Can you say what you mean: both are there) Because she's still really in the field looking around and in her pregnant state, but she's very aware of this other thing going on with the ship and the storm. (Really open to the music) . . . (And now?) I had a moment of more connecting with the baby. Wondering if the storm was connected with the baby. (Really go into the music, see what the music says about that, just really open and listen) . . . It feels like I'm now in between the two places; in between the space. (Is that ok to be there?) Yes. . .

### **In between pieces**

(How is that?) I was more thinking of the music towards the end and less connected with the imagery. (What happened with that?) It's almost like I needed to wait. I laid down in that in-between space, and then the imagery needed to wait. And I needed to just listen to the music. (Let yourself do that again, let yourself really listen to the music)

### *Debussy String Quartet, Andantino*

(How do you experience this music?) Darker; there's a feeling of walking through halls like in a cave, cave-like halls. (Are you experiencing the music as you're walking?) Yes. It feels like it's all around me like a cape. (Can you describe it?) It's a little bit like it's the push that's pushing me forward. (So can you really open to that? Take your time and really open to it) . . . (How is it with that now?) I threw the cape off to the floor. It was sort of an act of surrendering to it. . .but I am very cold in reality and also cold in my imagery. (So can you let yourself feel that? See if you can feel that coldness) . . . (How is it?) A feeling of being lonely but also after I threw the cape off I look like me and I don't look like the other female, and I'm not pregnant. I feel like I'm in a cave-like hallway and I'm underground somewhere, I want to get up (So just open to the music, see what it brings. . . let yourself be right where you are and really listen) . . . (What happened with the music?) It sounds kind of frenzied, but I went up into the building and I'm with this figure that has been in my images before that usually gives me some sort of guidance usually with maps. I call him the frogman because he looks like a frog. I'm sitting with him at a table and I'm really frustrated. I'm always frustrated when I'm with him because I'm getting some direction about what to do next and usually it's some difficult task like tearing down a building. (Stay open to whatever your experience is with him, just really stay with the music, let the music bring the experience, just open and listen, take your time) . . . This music, I feel like I

just went out the window and I'm floating down to the ground, sort of rocky. (How is that?) It's just kind of like floating there's no strong feeling attached. (You went out a window?) Yes.

***Copland Rodeo, Corral Nocturne***

(How are you experiencing this music?) I'm sitting on the ground in a position like I'm meditating and I feel like the music comes into me (Do you allow it?) Yes. It's like I'm being filled with strength. (Can you describe how it comes in) It feels like it enters through my head somewhere whether I'm breathing it in or it's just coming in like a light. (Let yourself open and notice all you can, really open so it can come in your head and really take your time to notice how it does) . . . I feel, I don't feel resistant to the music coming in, but I feel resistant to what it wants me to do. (What's your sense of that?) I'm getting really sad. It feels like it wants me to look at something that's hard or sad. (Take your time with that, just feel what it's wanting you to do, just feel what it's wanting you to do, just let yourself respond, let the sadness be there feel how it is there with the music)

***Copland Rodeo, Corral Nocturne x2***

(What happens when you stay with it?) It still brings more feeling than images - just being filled with the music and surrendering to the music and it's requiring sadness. I think that's it, that's what I need to do, there's nothing else to it. (Can you let yourself ? do that? What are you aware of?) That who I am right now has to do with being very still and it's really very hard to do. The music is, it's hard to describe, it's kind. (The music is kind) Yes. (You're feeling that) I'm feeling the kindness and then feeling the conflict of surrendering to it, and staying there and I just laid down on the ground. It seems like it should be an easy thing, but it's really hard. (It feels really hard) Yes. (Does the lying on the ground feel hard?) No, just accepting that that's what it is that I need to stay with it and not that there's something next.

***Copland Rodeo, Corral Nocturne x3***

(Accepting that you need to stay with the stillness? or with the conflict?) I'm not sure. (You don't need to figure it out, just stay with the music, stay open, and see how it feels) . . . There's parts of the music that I experience like almost a frontier quality to it like pioneering, and for some reason that is really touching me. There's a lot of sadness to it. (So just allow that, really feel those pioneering parts, let yourself be open and really hear them) . . . (What are you hearing?) I'm getting a sense that there's a struggle but being aware of the struggle and staying with it. The struggle is just in living; it's not in something that happened, it's just in living. (Really feel that, let yourself acknowledge that, really hear it in the music)

***Copland Rodeo, Corral Nocturne x4***

. . . (And now?) I'm experiencing sunshine and I was trying to feel the warmth of the sun coming from the music. (You're trying to do that) Yes. (Are you feeling that warmth in the music?) Yes. (Can you describe how you hear it in the music?) It's kind of striking me now just as a sunrise or just a sun coming out. (Let the sunrise be there and let yourself really open to the music being there with it, really open, listen, and feel) . . . (What happens with this part of the music?) The part right before this I went right back to the image of the ship with the water.



**Return**

(What are you experiencing now?) I'm thinking more of all the different time periods that were in my imagery. (Can you say more?) There was the whole biblical image of myself and then the more current one and this thing seemed very pioneering. I'm also aware that I was still for most of that last time [during the Copland] but I experienced it in a different way. I was letting the music in as opposed to hiding part of it, so it was a different experience. (So can you let yourself know that, just really feel that as something different for today, there's something different about letting it in today so really feel that) . . . (How does it feel now that the music is off, how is that?) . . . It's ok, I'm quickly aware of all the other sounds. (What about inside, what's it like inside?) . . . I have a sense of being more ready than I was before. Then there's the sense of the music still being inside of me. (Can you say how you sense that?) There was such a strong image of it pouring into *me*, so that still feels present as a source of strength. . .

## Appendix I: John session transcript

### Music assessment procedure

#### ***Villa-Lobos Bachianas Brasileiras excerpt***

(How do you experience that?) First of all it was so nice to hear the guitar, I love the sound of the classical guitar, so that was beautiful, and the tenderness of the singing stands out, and feeling a human being touching the strings - that was very nice. (Now here comes a different one and I want you to tell me about this one) OK. . .

***Schubert Trout Quintet excerpt*** (How's that?) I like it. It brings up a more formal feeling and an image of people sitting and playing; from the past time, you know, like a different era. (So if one of those were to be closer to you, would it be the first one?) I think so, but I like the second one, although I enjoyed the first one. And I love the harmonies and the changes. I mean I could talk about that, but when her voice became a little more operatic or something became . . . more . . . technical, then. . . I don't like opera, and I want to like opera, I mean I know it's such a moving experience for people, and I've gone and enjoyed it and felt hey it's good I can get into it, but I don't have those moments of catharsis that people have with opera. You know, when they hear that kind of trained voice. (I'm not going to play that one for you yet either, both of those are waiting in the wings. I'm going to start with sort of a different piece and you're not going to know it yet. So you can wonder about it, that will keep you open) . . . (Let yourself open to this piece)

### Music program begins

#### ***Rodrigo Concierto de Aranjuez, movement 2***

(So how are you experiencing that music?) It's a kind of beauty, and reaching out and wisdom of the earth and of history. I love the texture and the oboe or whatever that is - it is really nice. And the beauty; the suspensions and things, it propels you but there's such a gentle wind. (Just really enjoy that, really open to it, really hear it) It's like life goes on. (So can you take that message from the music?) . . . (How's that?) Something's challenged or something's gone wrong. Dialogue. More entities entering, at one point it felt like a solo with the world and now it's other things I don't know; people or whatever, but . . . it could be the grandfather, the wisdom. The pacing is slower, he has something important he wants to say. (So listen to it) Mystery; what's going to happen? (Just stay with it) What's happening? It's a lot to keep up with. (Just stay with it, just tell me whatever you can) Father and son . . . Passion (Really feel that) Unison, we all agree, now is the moment! (How is it for you?) It's actually emotional. (So really feel that) Some excitement, some sadness. I'm not sure; is that right, am I right? (Yes) Is that the end? Oh. It was so sweet.

### **In between pieces**

(Say a little bit about what happened at the end) It was like we made it. The major third at the end was so delicate; like a bird flying out of my hand. It was very sweet. One thing that's coming up for me is that I hear the parts as entities - almost like it could be child or son and father or something like that. And it's in; but it's also out - like it's me, but it's a father and son.

I mean obviously it's all a part of me. So it's just interesting I'm just noticing that. (Right now can you kind of go inside and see how you are, see what you're aware of. What's the feeling? That end was delicate) Tender; we went through something. There was passion and some turmoil I would even say; and at the end we were released or something. We got to where we wanted to go. So, I feel sort of satisfied; complete. We got somewhere, we went somewhere and it was good. It started off with one and ended with one; you know, the single tone, the single voice. (I'm going to play the piece again and I wonder how that will be for you) I'm pretty sure I've heard this piece, I mean I know I have, but I can't remember the name of it, but I tried to let go like you said. (Let's see what happens now, so open yourself again)

**Rodrigo** *Concierto de Aranjuez, movement 2 x2*

It's so beautiful. (Just express whatever comes to you) The oboe feels like a duck, like ripples of water. A person, I just feel like the guitar is just so expressive, you know. Insisting to express their individuality, you know those little da da das. (Really feel that) Yes, it is beautiful or something like that; yes I hear you, I acknowledge you. Something about the minor - pain can be beautiful, or sadness can be beautiful. I feel a kind of romantic thing between the two: the guitar and the oboe. They love each other; there's two separate individuals trying to connect with their melodies. (So really notice how they connect, really open and feel that connection) It's not going to last, we want it to. Ice skating swirls. Let us be, let us be, don't take it away. Something to say. (How'd you experience that?) I just feel there's a pleading between the grandfather and the child - the high part that came in. This is like a fusion; ominous, it's not really ominous because life *has* all of this (What are you experiencing?) the pain, the turmoil, and you know, the beauty. I'm trying comprehend it all, make it a part of what is now. (What's that?) I just love the texture of that. (Let yourself really enjoy it, open to every different texture, really open to it) (Really open) (Really open) (Open as wide as you can) (Stay open to wherever the music goes) (Stay with it, stay right there)

**Return**

(How was that?) That last note is so beautiful. That was nice. (So take your time) I want you to tell me what happened, but I want you to enjoy it) It was almost, not orgasmic, but sensual or sensuous or something. If you asked me what I felt I would say bodily sensations; not dizziness, but just being swept physically. You know like being swept away, it's hard to put one feeling to it; there's a lot of feeling. (So don't do that, no words now, so just stay in your body) It was exciting. . .

## Appendix J: Nancy session transcript

### *Wagner Siegfried Idyll*

(How are you experiencing the music?) The music comes in, body expands, the way dough rises, full, growing, full of life (Allow that, with the music) I notice a sense of confidence and competence, and absence of worry. The worries that I had before just aren't there, I can just do what I need to do. (Really feel that) Want to bring that expansiveness into my mind and heart (Just go into the music; see what the music suggests) it's telling me "one thing at a time; you have to start somewhere." And this is where I'm starting (Take that in) The rest will come. It's OK to move to it and not be right there all at once. This is preparation for that (yea)... (The music tells you to stay with the body) Strange image. My outside is huge right now, like dough, and inside is small and delicate flower. It's just tiny, tiny (yea) and delicate and fragile. The outside holds and protects the tiny, delicate flower. It needs that giant soft big me to let that grow. It's going to; but I have to allow myself to be here first before I can grow and be nourished. That's exciting – that I'm not done growing, that there is still so much more. (Really be so fully in that image, and really go into the music) (Open to whatever the music suggests) The music feels like something's growing but I don't yet feel that inside. Something's forming, taking shape. (Really notice what happens with the music) I don't know how to say it, my awareness is growing. It's so bizarre, it comes from the back of my head, so odd; like a bug's eyes come out. My antenna are coming out, not literal, but from my skull. I'm seeing the world so much clearer, with that sense I'm taking from the world more deeply, I can be more open. It really is that sense of bringing things into me; spiritually, physically, emotionally. I'm so present with that (Really feel that). . . . the antenna sense is heightening all my other senses, my eyes open wider, ears, heart, my arms are out open and it comes right through my chest. (Really open to the music) (yea, let yourself breathe). Mouth, chest, before it was swirling, now it's growing. Even though the flower hasn't grown, it's building strength, the flower is getting stronger; it's opening. The music says it's not time yet; building the strength is what's needed – becoming ready. (you?) I'm becoming ready for the flower to grow. Me, the flower is the essence of me, who I am. It makes me excited to live. (Let the feeling be there) I feel so lucky, there is so much life. There is so much more to do. It's reassuring that having a child and a family doesn't have to limit me, it's a part of me. So many people want to tell me it holds me back, but it just adds to who I am, and they can grow with me. That's a relief; it's not me and them, it's all of us. (Allow the feeling) I don't have to choose. (What's happening with the music?) It's holding me and soothing; holding me in the understanding that life includes family, it's not one or the other, and that they move in the process with me. I'm laying on the music. (Really feel that).

### *Mozart Vesperae Solemnes, Laudate Dominum*

That feels like it could be me singing, full singing, full breath (Really feel you're singing) Almost like it's me looking down over my world; singing over it; my arms are around it. I'm singing to it. It's nurturing my whole world (Describe how it is to be singing) I'm nurturing my whole world, it's very tender. Voices support behind me, say, "Yes you can do this, you can do it all." The voices that tell me I can't aren't here. With the strength of these voices, I can carry that, this world in my arms, and I can help it grow. It's great love and a sense of motherhood - not only of a child, but of everything: me and my whole world. (Experience the voices) Great love. It really is a sense of motherhood. Not just of a child – of me, of everything.

***Mozart Vesperae Solemnnes, Laudate Dominum x 2***

I hope I can always have that sense of beauty and love about my life and my world (How do you experience it now in the music?) A reverence, awe, a feeling of being blessed – that this world in my arms is huge. I can put my arms around it, feel it close to me, and have it grow. And it's like my voice, singing helps it to grow (Describe more about the singing) It's me, it's the love in me, the confidence in me coming out (How do you feel that?) It draws on my inner competence, inner confidence and security. It draws on the good things in me and brings it out. It leaves behind the doubt and the worry and the fear; doesn't take it away, just leaves it behind. It's not needed here in this voice (Do you have a sense of how it does that?) It comes from so deep in my heart, and that's where my pure heart is. It goes right down into it and then comes right back out. And the fear and doubt and worry aren't in my pure heart (The voice goes down so deep) not into my heart, deep into my being. It goes down there and brings it out, and lets me sing out. It reminds me of that's who I am. The negative voices – that's not me, I don't need to pay that any mind, it's not me anyway. That voice is what I need to remember. (This voice is what you need) yes, for me and to take it out into the world; that's what I want; what I want to be putting into the whole universe. (Listen to that voice) I want people to know *that's* me. I want it to just emanate from me (Is that what it's doing now?) Yes. (Would you like to hear it again?)

***Mozart Vesperae Solemnnes Laudate Dominum x 3***

What I love about the voice is it's pure. It seems like it couldn't be pure *and* full, but there's so much behind it, emotion, color (Let yourself experience that) It's the clarity. I want to embrace that clarity. (So just let go; listen so deeply) These voices are like hands under me. I'm perfectly confident in them. I know they'll hold me. This is like me saying thank you to them. I feel you, I hear you, thank you.

**Return**

Gratitude, thankful for being blessed, this world. . .

### Appendix K: Deval session transcript

#### **Bach (orchestrated) Prelude in Eb minor**

It's like a big open meadow, like an inverted bowl, it's concave like if you turn a bowl upside down. It's very bright colors. I feel like I'm not even on the ground, I'm not lying either; I'm just in the space. (How do you experience the music there?) It's openness. (So really feel that in the music, really feel that openness) The colors are bright; greens and pinks and blues. Heavy; like I'm finding the ground. In the distance there's a very bright light almost like it's reflected off something. It's moving though, so it's like it's alive – as if someone were clothed in metallic clothes and they're far away. I'm not supposed to come near them, but they're there, and the way the light reflects off the garments – it's as if it were in constant motion. (So what's in the music now) It's opening up awareness of what's around the metal. (So can you go with that?,) This cool pinewood. The being is running around in the space always slightly off to the left. It seems that there are other beings in the forest around. Their garments reflect off blues and greens, violets, and silver. (They're moving around in the forest) Yes, very slowly. The overall feeling is one of peace; and one of being here is right. I don't feel like I'm a stranger.

#### **Beethoven Violin Concerto, movement 2**

I feel a little bit like my feet are on the ground but the ground is very soft. (So really open to this music) Now it's a silvery-blue light high up above the meadow. (The light is above the meadow) I am above in the light. It's like so light blue – it's beyond powder blue, mistier misting. Now the beings are like wings, wing shapes. (How is that?) It's a kind of awe. (Really open to that feeling) It's going higher (How do you experience the music?) Soaring over the previous space; somehow not being touched and yet being held by the wings. (Really feel that) (Open to the music and the feeling) It's a vast space you can see forever. (So you're up in that space and you can see so far) And I'm held up by wings, but not my wings. Dark blues, brilliant highlights. I'm going to meet a majestic being; I'm being carried (So let the feeling be there) (? ? music) (what happens now) I feel so small but safe. Whatever it is that's holding me is holding all sides. (So really feel that) It's so soft. It's really firmly holding, I'm free to move but I will not fall, I'm very high, it's a night sky. (Really feel that place, feel how you're held, really let the music be there with you) It's like a cloak, it's like a cover; like a blanket or cover and it has pink and mauve. It's beautiful piece of fabric, beautiful folds and it seems like it is for me. It's being held up before me and they are directing me to where this great being is. It could be more than one being but I'm not sure. It's almost like this is what I should put on to go meet this being. I feel like I'm just millimeters thin, like a thread; just very high, very supported. There's an opening and a light coming through a door. It's apricot and gold and pink light, very soft. (Stay with that) It recedes with distance but it's like a path. All around are these beings with wings the colors of night - grays and blues. They're keeping me focused on the light; I feel like I'm being very gently turned and rocked and I'm about the size of a pencil, which is bigger than I was before when I was a thread. I'm always focused on this far away opening. (Stay with that, here comes the music again)

#### **Beethoven Violin Concerto, movement 2 x2**

It's like I've come to a higher place than before but now there is a structure but it's not made of solid. It's like spun clouds, as if they were a tower with a turban on it, but made of clouds - a little bit like meringue, but it seems like its made of vapor and light. Now I'm being beckoned. I

don't see the being but I feel as if someone were gesturing - come toward this turban space. Everyone's in agreement, this is ok. I feel like I'm being shuffled by the wings (What do you hear in the music as that's happening?) Opening; it might be where the path was leading. There's an opening, now a very cool green light almost coming down out of the opening like an invitation. I can go in. There's a big space inside. Dark green and blue, very elegant. The being is there but I can't see it. . . [tears] This is a place I should have come a long time ago. It's like, where were you? (How is that for you?) I've been ready. There are lights in the roof, very coherent colored lights, circles all around. Light blue, apricot, pervasive spring green and it's colored light; it's spread over a vast space. (How are you experiencing that place?) There's a high room; it's an honor to be here, I'm welcome. (How are you hearing that?) I'm invited to walk up steps and every step I take I see there are more. It goes farther; back into a recessed place that's full of light and the colors. The light seems to pulse gently and I can just take the steps and get there. Up and in. People come around in back of me to support me. It's odd; it's not like human people, it's like beings. They're very friendly - closer to almost light. No matter how far there's still more to go. It's a huge procession coming, but gentle and very graceful. (So open to what the music suggests) It's opening like a huge dish and I'm in the dish but also using the dish like an offering. The wings, the cloths are all dishes; supporting and I have a bowl like that to offer. A connection with streams going in both directions. It isn't like threads, but it's like they were being spun now; so incoherent at first, and then gradually spun into coherent threads going toward the lighted space.

***Mascagni Cavalleria Rusticana, Regina Coeli***

First it was gold red and now it's silver, very cool, but it's the same space. Big tall walls, open on top. Purple; support; stairs going up, moving so slowly and gently. More people are helping. The floor is open (Listen to the sound of the music) [transcript not available for this part of the music program – The procession of beings became people, and many more people joined the procession. The procession kept moving up towards a throne, but as it got higher and closer to the destination, it turned out not to be a throne – rather, it was a gigantic eye and he was drawn into it, and then through the eye into outer space – all the people were still there with him] [Verbal interventions were (really open) (really open)] I'm just as vast as that space.

***Canteloube Songs of the Auvergne, Brezairola***

(So really feel that) One being is coming to join me, to be next to me. I'm flying; I can't stop flying, I don't want to stop flying. I'm being rocked and we're being rocked together; like we dance or glide off to one side; floating in the space; there's no heaviness. (Hear that in the music) Now in a flatter space. The voice is my heart; I'm being gently moved, rocking (Really feel that really listen to the voice, really open, really focus on the sound, and hear it deeply) It's like I'm being put down on the ground. The voice is like liquid silver light; like the moonlight itself. (It's coming again so you can hear it one more time.)

***Canteloube Songs of the Auvergne, Brezairola x2***

Like landing in a boat. I'm in a still place; like a pool, tethered, moored. The voice starts in my head and goes all the way down to my heart. (So really listen to that, really let it come in, really listen to your heart; down, down, how does it feel) Like there is an open space at my crown that it comes in; then it divides and goes down both legs. So it's like one movement but the center is

here (Do you have a sense of what that's doing?) It's comforting and cleaning - sort of like taking cobwebs out. (How is it doing that?) By the operation of the light, by this brush; smoothing. It dissolve there's nowhere for it to go; it's gone in that instant. The drone is nice because it gives the effect of lying down - just rooted and just gently, gently rocking. (Would you like that one more time, what does it feel like?) Close to the end. It wouldn't hurt to hear it again.

***Canteloube Songs of the Auvergne, Brezairola x3***

I can feel it's really hard to come back. (You've landed; so take your time and see what happens with the music this time; open again) I feel my face relaxing ; a soft wind, and I can feel the bass notes where I'm lying down on everything it's touching. The melody caresses, but the continuity. . . cleans (Notice how it does that, really pay attention to what it's doing) . . . It cleans by turning, like scraping a little but it's not harsh it's healing. It's soft; it gathers little bits of light; wherever it's touched is instantly healed.

**Return**

Peaceful and a little heavy. . . I was feeling my pulse everywhere over my whole body and how it was connected to the music pulse. . .



## Appendix L: Michelle session transcript

### Music assessment procedure

(I'm going to play a few pieces for you, just keep your eyes closed and as I play them will you just tell me how they sound to you, just anything that comes to your mind about how they sound)

**Bach Christmas Oratory Shepherd's Song:** Pretty, ballerinas on a stage (Here's another one)

**Beethoven Piano Concerto #5, movement 2:** Deeper (How is it for you that it's deeper) It's good (One more)

**Bach Concerto for Two Violins, movement 2:** Sad (So of those three which feels most like you whether it's pretty or not or deep or not or sad or not, you know which kind of feels like you) Probably the second one. (What came to you as you had your eyes closed, anything you want to mention) I was thinking about what was going on at my house right now.

### Music program begins

#### **Beethoven Piano Concerto #5, movement 2**

(How are you experiencing the music?) . . . (Can you say how you're experiencing the music?) I'm stuck at the ballet; I can't get out of the ballet. (You don't need to, how is the ballet?) It's beautiful. (Can you say a little more about it?) Well I'm trying to figure out if it's a man dancing or a woman. . . and I think it's a woman. (So really take your time with it, just notice all you can) I think someone's being freed. (So really feel that) Lifting. (Really feel that) . . . (What's happening with this music?) Running. (And who is that?) I can't decide. (So can you just let yourself go with the music, just whatever it suggests) . . . (And now) Watching. Trying to figure out the story. (Let yourself watch and figure out the story) Trying to pick the best dancer. There's a formality about it. (Do you experience that with the music?) Yes. (Can you say more about that?) Because I'm at the Wang Center and I'm dressed up. It's beautiful all around. (So really let yourself be there, experience that so fully just as you're really there) . . . (Can you feel that as if you were there?) Yes. (How is it?) It's great. (So let it be great, really enjoy it)

#### **Beethoven Piano Concerto #5, movement 2 x2**

Someone's looking for something. (Can you say more about that) Looking for another person. (So I wonder if you can listen so deeply to the music just say whatever comes from it, really open and listen, take your time) This is the female part and they're outside, near water. (What else are you aware of there?) The chorus. (The chorus is there) . . . (Can you say more?) They were looking for each other in the forest and then I can't decide if they found each other. (Can you not decide can you really just listen to the music, in a way you don't need to decide let it come from the music, really open to it, hear how it sounds) They are together. (They are together) Yes. (How do you hear that?) Because both parts of the music came together. (How do you experience that, how is it for you?) Good. (Really let yourself feel that, just really hear it and feel it) (What are you experiencing?) Still there. (And) Not sure what's happening. (You have that sense that they're together) Yes. (And what are they doing, is it that they're dancers there together) Yes. (Are they dancing?) They're sort of going off stage.

***Beethoven Piano Concerto #5, movement 2 x3***

(Here comes that music again) . . . (What does the music bring now?) This is the man. (How do you experience it?) He has brown tights. (What else do you hear or anything more about him) He's looking for her. He's worried or something. (So really stay with that, be open and aware, really let the music in, see whatever happens with the music) This is her part. She's reflective. He came upon her. (Really hear that, really feel and hear that) . . . (What's happening with the music now?) They're getting to know each other. (Can you describe it) Some sort of hesitation maybe. (It feels hesitating) Her part of the music. (She feels hesitant) . . . (So really stay open to what both parts of the music are doing) He's pursuing her. She's deciding. (Keep following the music) . . . (Now) They are together, but they haven't actually decided yet though. (What's your sense of that, what happened at the end?) They went off together, not for forever, just for this moment.

***Schumann Fünf Stücke im Volkston, Langsam***

(Let yourself open to this music and see what happens) It's wistful. (Really open to that) Musician but I'm not sure what instrument it is. (How do you experience the musician?) Watching his body when he's playing the music. (What are you aware of, let yourself feel that really be in that movement) . . . (How is that now?) I'm wondering how it would be to play like that. (So can you let yourself feel that, get into that feeling of playing the music, open to the movement, the sound) (How is that?) Wondering who wrote it and why? (So just let those questions be there) . . .

**Return**

(Anything else about it at the end?) . . . (Is there any other sense or anything? And how is it as the music is off, what are you aware of?) Birds. (Outside) Yea. (How is it inside, any thoughts, what sort of state are you in?) Calm. (Your body feels calm or your mind?) Both. . .

## Appendix M: Bill session transcript

### **Respighi** *Pines of Rome, Gianicolo*

(How are you experiencing the music?) Is that a question? (Yes, how are you experiencing the music?) This is like at night, an owl, and then day started to break, so it's sunny out, the rest of the forest; birds are flying around, more things are happening. (So, day is breaking and more things are happening?) Yes (So really let yourself see that and feel that) ... (What is the music bringing now?) Now more colors, dark blue colors, something dangerous, like something dangerous, maybe something in the distance. (So let yourself feel that). . . (Now?) That was patterns of light (Is that with the forest? Or separate?) Separate; I lost the forest; an image of the Wizard of Oz. . . [Music off]

### **In between pieces**

(And now?) The forest came back at the end, but it was more like a meadow. (Here comes another piece; let yourself open to this piece)

**Strauss** *Death and Transfiguration, Transfiguration* (How does the music sound?) A big cruise ship, lots of windows, people, it's exciting (Are you still with the cruise ship?) Now it's just the ocean, the water is shiny, it's sunny in my eyes, lots of purples. (Really look and notice all you can). Now it's very dramatic – actually its too dramatic, it's really cheesy. It's like a romance on a cruise ship. (Now?) It's making me feel like - it's hard to keep my eyes closed because I just want to open my eyes and say like, I'm done with that (You can do that if you want – yes, it's too dramatic) yes [opens eyes] (so can I give you another piece?) Sure.

### **Brahms** *Symphony #3, movement 3*

(As this one comes on, tell me how this is for you) (How do you hear this music?) A dance, in olden times, black and white (How is it for you?) Good, OK, not very intriguing (I wonder if you can describe how the dance is going on) a guy in a tuxedo, old fashioned, 40's dress; dancing on a cruise ship (What kind of dance is it?) (Is he dancing with this music?) He's dancing with a woman, classical movement, it's changing now (Just describe it as it changes) there seems to be a lot of different moods; when I feel like I'm getting it – it changes – but then it comes back to the couple dancing (Is it OK to let it keep changing?) Yes (just follow it as it changes) (So what's there now?) Now I notice the instruments (What do you notice) nothing intriguing, they're all very similar; black and white, nothing really standing out (Is there a feeling?) no; nothing's coming; I'm not feeling it; not sad or happy or angry; (Really stay with just listening to the music and describe all you can about it) I don't really have anything to say about it. I hear the orchestra, and see the audience, la, la, la they're just listening like they're supposed to be listening, not because they want to (Listening because they have to?) Yes (So let yourself really see that image and feel that)

### **Brahms** *Symphony #3, movement 3 x 2*

I'm getting that the old fashioned style of everything is the crackling of the record (Yes, yes, just take that too) (Say what you're hearing now) The same (I wonder if you can really, really open and listen, and see what you notice) (What do you hear?) I'm not getting much, just the same tones and melodies. Something that tries to grab my attention, but just doesn't (And what are those melodies like; the same tones - can you describe that) A little wave on the ocean; it comes up and as soon as it's going to fall on you, it doesn't reach you (Does it keep doing that ? the wave keeps going up and then it just settles down) yes, there it is again (Let that feeling be there; accept that; stay with it; notice whatever you can

in the music – really open and notice the melody, notice the tones). . . (What’s it doing now?) Nothing. (Is it the same?) yes; My mind wants to think about something else. (Are you experiencing the music and wanting to think about something else?) Yes (Stay with that and tell me what happens) I’m remembering looking at a book – no, it was an exhibit of photos and talking with an artist. A photo of elephants and a dome and which of the other photographs went with that.

### ***Debussy Danses Sacred and Profane***

(Here comes another piece). . . (How do you hear this music?) This is more interesting; I started to take the image of the elephant and started to make it go with the beat, and then the harp came in; I just lost it (go back into the music and let yourself open) . . . (What happens now?) There is a stack of hay and needles – a pile of it (you see a stack of hay and needles) no, the needles of hay piled in a stack (Stay with the image and see what happens with the music). . . (Now?) I’m not seeing that anymore (so what happened) I started to feel dizzy; I snapped out of it for a second. Now I see red outlines on the edges (can you say more about that? – in your vision there’s red around the edges?) Yes, not too much going on in the middle - with like fingers coming in (fingers in the middle of your vision) I’m starting to get a little dizzy – like things are shaking, that was weird, I don’t know why (You can open your eyes if you get too dizzy) [eyes open] OK, I’m not dizzy, just shaking (when you close your eyes, the vision was shaking?) Yes, it’s happening now even with my eyes open (It’s a kinaesthetic sensation – Is it happening with the music?) No, it’s not horrible or anything, it’s just weird. (If it’s not horrible, you can close your eyes and see what happens) So, a wagon, an old Western style wagon – one wheel is broken and rolling down a hill (One of its wheels is rolling down) Yes, (Is that still there?) A TV antennae doing this same thing (rolling down) not spinning, awkwardly spinning (So as each response comes up, let me know) (How is the music now?) the same (Can you say how it is the same?) Repetition, cycle, rotation, repetition (You have a sense that the music is repeating) Now I feel like I’m spinning more (Is it OK to follow that?) yes (Let me know if it becomes uncomfortable; if not, just let it happen) It doesn’t feel like it’s going with the music (So you are rotating and the music is rotating, but you’re not together – how is that?) It’s a bit disorienting (Is it OK to stay with it and work with it?) Yes (OK, feel how it is and describe all you can to me). It’s like teeter-tottering (Stay with it). Almost like an amusement park ride.

### **In between pieces**

And still doing it after the music stops (Would you like to hear that piece again? to stay with that and work with it some more?) I don’t think so. (So let’s go to another piece) [Sits up] (Are you still spinning?) Not spinning, shaking (How do you feel now?) I’m not comfortable with the shaking. (I wonder if you want to lay down; I have a piece that is chilled out, you can come out of that shaking – and listen with your eyes open. Tell me how this music comes to you.)

### ***Faure Pavanne***

Nice (What does it do with the shaking?) It’s not even the same thing. It’s different, different with my eyes open (So can you describe this music? What’s happening?) The beginning of a journey; footsteps (So just relax and follow it) Feels like strolling by a river, as the scenery unfolds it’s richer (Just really see and feel it) . . . (What happens with *this* part?) A big stone bridge. I’m surprised to see that. Something sad happened. It just seems like a lot of this classical music doesn’t bring contemporary things to mind – it brings old things – fantasy land, black and white (Is that OK? You never quite know what it will bring; if you can just accept whatever it brings) OK, yes, yes. (And now, how does it

sound?) Happy, it sounds content (So can you take the feelings that it brings?) It doesn't really make me feel happy, but it sounds happy (So just enjoy that). . .

**Return**

## Appendix N: Hillary interview transcript Summarized

### *Faure Pavane*

- I remember that the music made me happy right away, and that wasn't what I was gearing up for. So there was an immediate reaction to the music. I feel that the music was really directing the imagery; that it put me into that space of being in the field; immediately . . . because I had images going through my head as I was lying there before I started and none of them were close to that.
- I first thought, oh this was really sweet and then the "dun dun dun" it was like the walking through the flowers. There was a clear connection with that – you know, the strings being plucked. I had the feeling of walking through the flowers, but not a steady stroll; looking around with a curiosity.
- With the main theme, there was a feeling of more support than it being just one instrument. But I think because it's so connected and legato that there was just a feeling of a very sweet, gentle, supportive quality to it. And at one point I thought about this being kind of sad. It's funny that it struck me as happy right away.
- There was a feeling of being on hormones, and of being carried along with the music too. That music had that quality to it, at that point anyways.
- When the music changed it struck me right away as masculine; then came the stormy image – it was louder and the instrumentation changed.
- At the first part (beginning of the piece) I experienced the music as carrying me and being very with me, but in that part the music was definitely in a different scene creating a separate scene. That's why I saw the scene in my mind. I wasn't there at that scene, so the music was someplace else; I could look at the music far away and then I could be back with the field music when it came back to that theme. I was very aware that I could be with one but think of the other. They were both there and so, in a sense, that music was with me and part of me but I think I separated it by making it a thought instead of being there.
- Next, I was in touch with the thought of the baby inside of me I had the thought that in a sense that was that music inside of me a little bit. I thought, "Is the baby experiencing this stormy music?" I wasn't aware of that in that moment – but this is the thought now – that was a way of bringing the music inside my body more. I was able to connect to the music with the baby, which was much more connected than connecting the music with the storm. So then instead the storm was with the baby.
- Next came an "in between" feeling. It was almost like there was a door and I could walk through that door to the stormy music or I could stay on the other side to the field. It was in that sort of liminal space. And the baby somehow connected that too -- because the whole transition and a baby coming and the in between space when you're waiting for the baby to come. I think I also had a sense that the piece was going to end; maybe I was waiting for what was to come next.
- I think the instrumentation was getting sparser then, but I don't know if I'm right about that. Either that or there was more space in the music. In that in between space I wonder if I was waiting to see which direction the music was going to go in. . . . and I guess I can't say I was convinced that it was ending. I knew that it was going to end or shift. I felt that a transition was coming. . . .

*Debussy String Quartet - Andante*

- This music immediately sent me into a different scene. It had a darker quality to it -- of walking through hallways. Although I said the first piece carried me, this piece was all around me. It was more the feeling of a shadow behind me pushing me along. I didn't have that image but that's the image I would put to it now -- very slowly propelling me forward.
- There was a feeling that it was around me and pushing me from the outside, but there was maybe a little bit of a feeling that it was pushing me - making me search -- internally; it held that quality to it.
- I experience the music as having a heavy quality to it which was the cloak around me, I think.
- There was a feeling in throwing off the cloak -- that all of a sudden I was more exposed. I wasn't naked in my imagery but I wasn't pregnant any more, so I was thinner. I just felt more exposed when I threw that cloak off. I was exposing myself to the music. It was surrendering -- the image there was less of the soft mothering quality and more of a fighter exposed -- I didn't experience the music as having a fighting quality to it. It was more of a dark, searching, longing thing that I think I was picking up on in the music.
- The cape or the cloak was rather heavy and so having it off ... I didn't have the sense of feeling lighter but I didn't have the warmth of the music around me. It seems opposite of what it really is. You would think I would be surrendering to the music when I had it wrapped around the music instead of when I threw it off - except then the music is on the ground it can see me being exposed.
- Throwing off the cloak was defiant -- I looked like more of a fighter; but somehow it was an act of surrender too.
- Next, came a feeling of spiraling up with the music. It really matched the music being sort of frenzied. Somehow I was finding my way going up. I didn't feel like I was spiraling, but that was my interpretation of the music. I experienced the music as having this spiraling up. It was more than an image. I didn't have a strong image.
- I have a sense that my attention was much more on the music (in this session) -- much more than it was in the past. Which I think is surprising considering how many sessions I've had.
- Next, I think the music was what suggested for frogman to come back again because I was remembering it from a previous session -- because my experience with frogman (in this session) was not as intense as it has been in the past. I realized that (this piece) was from the *Caring* program as I was listening.
- I don't remember the transition of what sent me out the window but I do remember that the music was really supporting me rocking down in a rocking sort of manner. I was experiencing the music as having the rocking to it. It's the melody that created the rocking sensation for me -- the combination of the melody and rhythm (pulse) as well.

*Copland Rodeo, Corral Nocturne*

- I feel like it's harder to talk about the music at this point because I think I was more merged with the music.

- Re-experiencing it now, there was something happening with the melody up in the higher range -- maybe that's what was what was creating this kindness and sadness. I don't know how it was mixed together, but from the music I was getting both those things. Also I had the feeling that just sitting down and meditating was ok; I had the feeling "I have to sit down and just be with this music."
- Well, what stands out was that the music was compelling me or ordering me to sit down and listen to it -- like I didn't have a choice, as opposed to having an image of sitting down to this music. This is the reverse, I think, of how it would normally happen for me where I have an image and then I am aware of how it's connected to the music.
- As you (Lisa) are saying that the music "compelled" me to sit down and listen to it, it gives it a certain amount of authority that I didn't know it had. Also, the idea of dropping the cloak and feeling exposed to the music reflects a difference of power or authority from the music -- because I felt exposed to this thing that I had thrown off. Maybe there are similar qualities to those two experiences -- an imbalance of power (music compelling me to listen and throwing off the cloak) even though they were two very different experiences. Wow; it can be such a gentle piece of music but still have a powerful and authority.
- What gave the music its authority? That would take hours to talk about, but I think it has to do with what makes music powerful. I think it's because it's a complex piece of music. I'm sure I give the music its power and authority.
- I do think there's a strong aesthetic component even after sitting down and having to listen to it.
- The second time through (the piece) it was like the music required me to be sad. That was the second time through, and I think the second time it was the same, but more intense.
- I was grateful that you played it again. Because of the feelings that I was experiencing I wanted to stay with it longer.
- It was very connected to the previous section you just talked about, that feeling of lying down and just surrendering to the music. I was still very much connected to feeling the music rather than being aware of an actual image.
- Again it's coming up that sort of authority thing. The music was kind of giving me this sort of message of "this is who I am." "This is who you are" or "this is it." "This is your task." But I can't really convey the way I felt that from the music. I don't know what it was about the music that was giving me that sense, but there was definitely a strong connection to the music; a relationship with the music. The music is bringing up the sadness and kindness, and then this insight. It's hard to describe the connection with the music. I had a strong relationship with the music but I think it was wrapped up with the insight I was having.
- But at that moment the music was the "me that had that insight" and it was coming from the music but it was coming from me too! The music allows us to have these feelings and then it becomes its own entity that is somehow a manifestation of us. So it's a transference. It's the circle thing: the music was creating the feelings; then the feelings were allowing me to have the insight that was coming from the music -- but it was really my insights coming from the music that were going back into me. So it's just this cycle. That's one way that it works.
- There was a strong sense of getting the strong message from the music or being guided by the music or maybe that authority thing. But it's now me talking about the process saying that was me too being projected into the music so that I could have those insights.
- That it was me and what was coming out of the music was coming back to me. It allows everyone to put out in the music what they need to come back to them. So maybe it was



finding my own authority in the music. I like that. It's very empowering. I was finding my own authority through the music and I was being empowered by the music. . . So I was being empowered by myself by the music.

- Being open to the music and trusting the music are two big points (in this session). Right before we got into the music I remember thinking I really trust the music and I trust Lisa and I think that contributed to me being open to the music.
- At this point I was still very aware of the kindness and the sadness . I'm not sure how those two mix together, but I was feeling sadness and the music was being kind to me. When I think about that part of me lying down I still think of the music almost as being up here (above me) talking to me when it gave me that message. The first message from the music had been "this is *where* you're at; you're sad, be with this." This message (the one at the end of the session) had a more global sense, like "this is *who* you are."
- It wasn't like I was experiencing it as an outer voice commanding it or saying it, it was more like an insight. It was like an insight revealed -- but there's a sense that it came from the music not from me.
- When I think about it now, I still experience it as the music being out there giving me the insight -- even though it was coming from within me.
- I think I felt the quality of sad and kind coming from the music but I'm not sure what components in the music led me to feel that. It's only now (in this interview) that I interpret it that I was sad and the music was kind. In the session it was just a feeling of kindness and sadness coming from the music.
- I have the feeling that the music was out there and making a path all the way to me, connected all the way down to me - almost how sunshine can shine down on you but be in another place. Sunshine isn't quite strong enough because sunshine seems too soft for a thing that filters down. It was more like dynamic colors. But I didn't see that in my image. I'm saying that now (in the interview), that wasn't what I experienced in my imagery.
- What's really hard to explain is the two sides we were talking about where the message came from music and within me. I still have this strong sense that the music was giving me this message but I think of it as an insight that I had at the same time. So I hold it as both.
- I think the pioneering quality definitely came from the music -- since it was Copland that makes sense. Then something in me connected with the whole struggle of the pioneering aspect. So the music suggested that and I connected with it.
- Maybe three (repetitions of the piece) would have been enough, but I really appreciated the sunshine experience (on the 4<sup>th</sup> repetition). It was the feeling of repeated sunrises.
- At this point I was a little less connected (to the music) than I was previously. I was aware of the repetitions and it was interesting that I could experience the same music again and get something more from it.
- This part of the music didn't fit with the kindness and sadness, and it suggested more turmoil. . . and I'm wondering now if I experienced that flashback to the storm every time I heard that, or just that last time when you asked about it specifically. I do remember thinking, at least once before, that somehow this doesn't fit with the rest, with the feelings that are being created.
- But it was short enough that I didn't have to do anything. If that section had gone on, I think I would have gone some place else in the imagery. The turmoil part was more like a reminder "oh, and then there's this and it's a little more complex" -- but it wasn't inviting

me to engage with it. It made the feeling of sadness a little more intense. But like I said it didn't invite me to engage with it and leave where I was at. The feeling of where I was at was stronger so I had to stay with that.

- I think that because I went back to that (during this repetition), that was something I need to explore maybe at some point.

Regarding the postlude. . .

- At the end of the music, it was funny, I had the feeling that it (the music) was still inside of me. I was aware when it was over and it was off, and I began to hear the traffic outside, but I had a feeling in my body that it was still inside of me. I kind of felt like a fullness and I think that goes back to that sort of aesthetic experience -- that that brings a feeling of fullness.
- I felt like it (the session) made me look at the conference, or interacting with other people in a different way, so in that fullness that there was some strength or confidence.
- I think because I was able to stay still for so long without music playing; I think that was different for me. (Then you started singing music. You were drawing and saying the theme was still in your head.)
- When I was drawing and I started to sing that theme I thought, "this is my theme right now which perhaps holds a message for me" and I thought that I need to play it or repeat it. That theme can be powerful for me because it holds that whole experience or it holds the insight that I experienced in myself during the music. I think it's more about the insight that than the theme holding and the stillness. . . all of the insight was about the stillness so it's all wrapped up together.
- I think normally I'm more aware of the imagery but that the music is shaping it, but today I felt really connected with the music -- really being open to the music and allowing the imagery to emerge. I was aware of how much you were mentioning the music and how you were guiding, so I think that probably had a lot to do with it to it too, that you were connecting me by asking me to draw my attention to the music.
- When being focused on the imagery it's more my own story that's directing the process and being told. Being focused on the music allowed me to have more trust with the music -- for the music to take and suggest whatever it needed to. So I felt less invested in staying with an image and more open and listening to the music; more trusting and open to the music suggesting what I needed to do, versus the imagery carrying me on.
- There are few moments I remember in the session thinking -- aside from you telling me to listen to the music or to allow the music to be there -- "trust the music."
- I'm a very visual person, so I can get caught up in the imagery unless I don't like the music and then I'm focused on it (the music). So it was different to be focused on it the whole time and not because it had some outstanding characteristics that were bothering me.
- When it's giving strong feelings and emotions, then I become aware of it and less aware of the imagery and that happened today too. I was aware that in the moments that I was really connected -- when the stronger things were happening inside of me -- that I was more connected to the music and the feelings, and less connected to seeing what was going on in a visual sense. I've noticed that before too. I can't focus on both at the same time. If I go really strongly into those feelings and stay with those, the imagery has to stop.
- About those more complex programs and how I hide from the music - that's not a new thought. The thought is two things: either the one I'd like to believe or just that I'm too tired

or don't have the energy to go with the more complex program, but I think more likely that it's that I'm not ready to go into that amount of conflict or that feeling that I know the music is going to bring up - whether it's anger of intense sadness -- that instead of engaging with it I just get on the ground like it's a storm and wait for it to pass.

- I think that's when I had the imagery of the storm and ship and it was separate. So I think that's a version of the same thing, not engaging with it. . . some people experience those parts as not necessarily anger or conflict, maybe it's more empowerment for them. For me it's anger and conflict. Maybe if I'm looking at it as this separate authoritative thing, I can't engage with something that has that much conflict in it.
- I think it's important that after that I was in that space where I could go one way or the other that I could open the door and go towards the strong music -- even though it was inside of me with the baby. I could have not gone in that direction.
- It's a question of readiness to engage with conflict. Today it seemed like I could bring it (conflict) in more and that I had the choice of going. So I was experiencing it in a different way because it was out there and I was looking at it (the conflict) as a thought. . . so I wasn't hiding from it. I think it was closer to me but I was still keeping it (conflict) at a distance. In my last seminar we did a star shape travel and the music was conflictual and strong, like having it be above me, but I was able to stand there and watch it. It was more like objectively looking at it so I didn't have to hide from it, but I didn't bring it in. So that's another way that my psyche has done that. I was able to get closer to it but not bring it in.
- I think that just talking about it at this level (in this interview) is where the insight became even stronger for me about being empowered by the music. That didn't come in our postlude; that came in now. Being aware that the music had this sort of authority and then through the process of talking about it and being aware that the music was a projection. That I was projecting myself onto the music so that authority was really coming from me through the music. It's made the experience so much stronger, being aware of that. I'm understanding it on a different level talking about it that way.
- I was connected with the music and that the music was beautiful; that the music was me.
- I think that's wrapped up with the aesthetic experience that it's beautiful.
- I think I know, too, that that conflict that I don't want to go into is a part of me too. That I'm projecting that too, it's parts of me.
- I think (after this sessions) that when that music comes up again I can just look at it with a curious like, "oh, this is a part of me that I want to look at more" -- instead of "oh, this is annoying me, I don't want this conflict." It's so much nicer to be able to go into the music with this curiosity of what you're finding out about yourself instead of this fear of what you might find out about yourself. . . and I think that's important for people who have been through a lot and experienced a lot and have a lot that they are afraid of experiencing through the music.
- I think that after the sessions sometimes I think the strong images never get processed to the level that they need to be processed -- not that everyone could talk this much (as much as in this interview) about it. But for me, I reached a different insight by being able to talk about it this much.

Regarding music and guiding. . .

- I was really aware that you were focusing me on the music. It didn't bother me, I was just aware that I was being refocused on the music.
- I was just thinking about the whole concept as the music as the co-therapist and so this is really putting a lot onto the co-therapist.
- I really liked it (the music-centered guiding) and working with the really strong music and I think that it would be really helpful to be guided that way during strong music. If you let the person just go with their imagery and they are just lying on the ground just trying to get away from the music, you could keep trying to bring them back to the music; then if they were able, it would really bring them into focusing on it.

## Appendix O: John interview transcript

### Part verbatim, part summarized

#### *Rodrigo Concierto de Aranjuez, movement 2*

J: The vulnerability of the one, and then everything. Yes, I think it was shifts from one, to orchestra, one to orchestra. That struck me. That was very powerful. It was the sudden shift, from Spanish, then to the sudden orchestral woosh – sudden contrast. That to me had something to do with the power of it. That is sticking in my head. The shift of consciousness feels connected to the shift of the one to the wooosh.

L: And the suddenness sticks out?

J: Yes, the suddenness too... Something with the texture of guitar and the feeling of the human hand; the striking of the strings and the turns. The little bends of the notes feels very expressive and those tones that were yearning, reaching out with suspensions. - feels like pulsating of opening, opening, opening.

L: So when you experienced the guitar, you experienced it as pulsating and opening. You experienced the textures as human?

J: The texture... expressive. To me it's emotional. It feels like something that comes not from the outside but I can identify with the feeling. When I feel the human touch...it's speaking to me and I can live in it.

J: I wonder if that's the same Spanish piece that Miles Davis arranged? Write the name down for me, or I can see if I can find you the Miles Davis

J: [Beginning of piece playing] So the first thing that comes to me there is because of the placement of the oboe, it's like reflecting on something rather than being me, or being the person. It feels like I'm telling you a story.

L: Because of the space?

J: Yes. .. the rhythm stopped, and now they're just holding. And they are just speaking on their own, there is something solitary about it. Again, vulnerability...and the minor gives it something almost lonely. Not quite, but that combination... Again a kind of reflection, the fact that it's a major chord; not as intense. ..The call and response element of it. Now the guitar is playing the chord and the oboe has the melody, and now they are going to switch. There is something about dialogue there. ..the repetition – “we're talking about the same thing. There is some common ground...But I have more, there is something more I want to say about it” (with those little turns).

L: The turns say there is something more

J: I agree with you (they say); and listen to how I feel about it. More emphasis. .. The strings feel like witnesses, we're here to comment on what you two are going through.

L: So you feel them in a different place?

J: Yes, the oboe and the guitar are with the alternation of the melody. It feels like this is the focal point. When the strings come in they come from behind.

L: I have a question for you. At the beginning there was a faraway-ness and the English horn was telling you something. Now you feel like the oboe and the guitar are there, and the strings are commenting. Can you say something about this difference?

J: I remember feeling: "Where am I in this, where is my perspective? Am I the oboe? Am I the English horn, or the guitar?" or "Oh, isn't that something about what is happening out there that I'm responding to?" Where do I place myself in this?

**Rodrigo** *Concierto de Aranjuez, movement 2*

J: [Begin piece again] Every time I listen it's going to be different.

L: I know; that's very important.

J: There is something with the B flat. There is some pain there already, you know. But this is more primary. Something about this feels like now I'm entering myself into being the guitar, where before I was listening to something that was coming to me.

L: So the shift happens here?

J: There was a shift there. ..What's interesting is, it just changes all the time. I'm hearing that the guitar is there, and the melody is part of the guitar - it's like the strum is a different entity than the melody of the guitar... like one person is strumming the guitar and then taking a turn to play the melody. There is something about the strumming that is representing something, some other persona than the guitar melody, even though it's the same melody...

This is all intensifying with the build up, just more intensity and suspense. ..So nice. ...That entrance, the minor is shaking. ..Again, the shift from the solo, to the big orchestra. That Spanish thing, it's that Spanish passion. "Let it all out, there is nothing left but being in the moment," it's part of this music... That low register, is so nice, it kept coming to me like the wisdom of the older generation: "listen I know what you people are going through, but I can tell you what life is... death is a part of life... Look, I'm at the end of my life. I'm playing slower, I don't know how much more I can play (lower pitch)... But I'm holding on, and I can tell you life is worth living, and I understand your turmoil."

- The wonder, the suspense, what's going to happen, the feeling that we're not letting go yet, there is somewhere to go... A little bit of confusion with the tonal shifts. "What path do we take? There is a place to go, but where do we go?"
- I felt it pulling me. Passionate...emotion. Something calming... Here I remember feeling like this is some integration. This is not the grandfather or the child, it's somewhere in the

middle. Something is coming together between the two generations... Maybe that's the first time in the whole piece where I felt like the guitar was one thing, because now I'm hearing in one phrase the low register and the high register – so something came together there – whereas before I felt like the strumming is one thing, the melody is another, the low register is another thing.

- Every time a major chord comes through this piece, I feel there is something soothing about it. It's almost trite – I mean, major is happy, minor is sad. I hate to really say that, but I think it really happens in this piece...
- The force of his touch, you feel the humanity, this is about life. Yearning; reaching; intensity; it's just the emotion, there is nothing else that matters. This is it.
- It's the attack, the surprise, and the number of instruments... I don't remember what the chord was, but I'm pretty sure it was a minor chord... It might have been a new tonality from the one that was just before, but that also added to it... I just had this thought, that – for me – in an orchestral work, it's less about what the tones are, it's about the changes of texture. If I was listening to a guitar or piano piece, I would be responding to the shifts of tonality, but what's in the forefront in this piece is the orchestration. The changes of texture, feel very prominent in this piece. If I'm just listening to a melody here, I'd be thinking, "What's the note? or what are the chords the guitar is playing?" But when I'm hearing the orchestra, I'm thinking about the contrast and now this big texture...
- I distinctly remember the last part; that it was just so joyful to come to that major chord. And to come to that final tonality (I think it's a C).
- Now what I'm getting here, this sudden slowly rising up -- we've just been through the night and now, the sun. That's what I just got there. I didn't get that the other time... It's interesting – now I feel that I'm reacting to the piece as a whole and kind of hearing sections. In the session, I just remember living in every single tone... One thought that just came up: I've been influenced by a book by Jennifer Robinson, *Deeper than Reason*. It's about how much is just hitting us in a deep psychological way. And one of the ways to really experience it, and also to understand it, is to really understand the psychological drama. To hear the personas, to hear the actions. So now I'm kind of almost hearing the piece separate from myself. And I think before (in the session) what I was doing was living in the moment to moment unfolding exposition. I think they both (both ways of hearing the piece) inform me, and they both move me emotionally, but it's different. Also (during the session) maybe there was something about allowing my body to be a very big part of the experience. I mean now, I feel good, my body is here and with me, but I'm not "riding" the music as I was before.
- I liked listening to it twice (during the session). I think maybe it gave me a sense of anticipation and control. I don't think it took away from the power. I didn't feel disappointed (hearing it a second time). It wasn't like I was saying "I've heard this, I've heard this," it was: "I don't remember this part." ... Sometimes it felt, "oh yeah I like this," and sometimes I thought, "maybe I didn't remember this part because I didn't like this part."
- I think repetition is important... This reinforces the sense that you can listen again and again to a piece and it's like new. And even if you know a piece, you've heard it a thousand times, and maybe the last three hundred times you weren't moved, you can be moved the thousand and first time. It really depends on your state.
- Now that I'm hearing this piece a whole different way, it makes me realize that you can bring different parts of yourself (to the music), and you can perceive different aspects (of the

music) each time. So sometimes the music can be more in the forefront, but sometimes I listen because I want to feel something. Then the feeling of the music helps me to understand the music. So it just feels like a loop. I was concerned that I was going to analyze the music (in the session), that I would try to understand it rather than living in it, living through it (although I think when I analyze I do live it). I have a tendency to understand the form of the feeling, the musical feeling, the form, but not to really experience the feeling of it. This is actually a process and no matter what my intention is, sometimes the music will pull me to reflection and other times to fully experience – it's based on what's happening.

L: So the music pulled you?

- I think it was like the “wooosh” that pulled me in. I really wanted to take a ride in the music. I wanted to. So I made the choice to. I could have said I don't want to. So I was kind of led into it. But I think there were moments in the music when I was not volitionally making a choice of perception.
- When you would say “go inward,” or “go deeper,” or “open,” sometimes I would feel, but I'm listening to the music, I'm not making the music. My focus is on the music...
- It's back to that question: Am I in the music as part of the music? or Am I here and the music is coming to me?” I don't know, it's both, it shifts... Sometimes the words I used could maybe reveal that I was in it, and then other times, that the music was coming to me. But I was always in it – because it was always engaging me. The fact that I'm creating these things, it's coming from me. It's not like I'm sitting here thinking about the bridge or something. Even when it's a thought about an entity outside myself, it's still me doing it.
- I felt the oboe, or English horn, as a commentary to me, as the guitar. Most of the time I identified with the guitar more than anything else. Something about the solo helped me to be in it, to identify with it, or to hear a message or a person in it. I know there are other times (not in this particular piece) where I'm listening to another piece and everything is there as a texture and it's hard for me to get inside the piece.

L: You said you sometime feel that there might be creatures behind the music and they might be trying to send you a message.

J: I didn't get that with this... I'd like to listen to it again.

[Music playing, reading from script of second listening]

J: I love the quality of the instrument. With the breath.

L: Here's where you said, “It's so expressive. The person is insisting to express their individuality, and saying it's beautiful (you are saying it's beautiful).” And the English horn was saying, “I hear you.”

J: You know one thing that's coming to me from the expression and individuality is that the pulse is not coming from something else. There was this rhythm (before). Now it's just held, so all the tempo, all the pulse, whatever motion there is in terms of time, is coming from this person's melody. So that feels like individual expression to me. He is in control of his life. And



he can go fast or slow with it. It's not the pulse of the world that you must live within, it's his pulse.

L: Next you say, "sadness can be beautiful."

J: Does the English horn and the guitar alternate with their entrances, so that even though they are doing repetitions with the same phrasing, one time the guitar comes in the minor, and one time it comes in the major? I would want to go back and look at that, because to me that's interesting - like both have felt pain or something... This time the guitar came in on the relative major, more reflective. See there's the oboe coming in on the relative major. But before we just heard the guitar coming in on that major chord...

L: You have perfect pitch

J: It's hard for me to hear orchestral things. I can hear the piano... See now this is a major chord, which is what the oboe came in on before. It's almost like, "yeah, I'll try it on;" Now that the guitar is coming in on major like the oboe did, the guitar says "let me kind of try out what you're saying. Let me consider what you're saying to me."

L: and how did you experience that?

J: I don't even know if I noticed it then. I don't think I was conscious of that. Did I say anything when that happened?

L: no, I don't think so. I mean at one point, you mentioned that it was minor.

J: You know what I just thought of, should you have the score?

L: I'm only looking at your subjective experience of the piece, so no. But actually, since you want it, yes, with you, it would be helpful to have it here.

J: Now there is something relentless - it could be a march to the final end, like a funeral march. You know the death-life thing, I know we talked about it before, but I feel this here: there is no way of avoiding the finality of life.

L: And how do you hear that finality in the music?

J: Well, I know it has to end. I mean, it's like...dumph, dumph, we're heading off. And the combination of the minor, with this, gives it a kind of funeral like thing.

L: Is it the steady pace?

J: The slowness of it, the steady pace, the same tone. Something about marching to, moving to, a place where it ends. Somehow it says that it will end. I don't know if it's just the slowness, but you know, life leads to the end. It's a combination of the minor, the pain, the obvious life and then tumultuous thing. And the fact that a piece of music starts and ends.... The pulse of this

feels more like: This is the human condition; our hearts beat and then they stop beating. This is something you can't avoid.

L: That is so cool. Is this what you're saying....? When the pulse is in the guitar it brought your attention to the humanity of the guitar player, (but not the human condition). His pulse, the guitar's pulse was human life; there was pain, but not that sense of the finality of life, of the human condition. It was when the pulse was down there (in the orchestra), repeated, and not embraced by the guitar, when the pulse was separate from the guitar – that was when you felt the sense of the human condition (with it's finality of life/death).

J: When I heard the guitar playing the pulse, and it was doing with those chords, it was more like the ripples.

L: The next thing that you said was “This is romantic between the two; a feeling of romance. They love each other. They are separate individuals trying to connect. And the feeling, once it became romantic, there was a feeling that it wasn't going to last. They wanted it to last, but it couldn't last.”

J: I don't know where I said that, but I remember saying it... I wish we knew where we were (in the piece... [and subsequent confusion about where we were in the piece....])

L: you have to let go of that, we can't know exactly. Sorry.

L: And now comes the ice-skating...

J: The register thing gives me man/woman; low register/high register

L: Ice-skating, swirls, and then they say: “Let's us be, don't take it away.”

J: So saying it like that makes me feel like I'm in it. I didn't say the iceskater says take it away.

L: and then came darkness. Then I have something to say...

L: They are pleading between grandfather and child...

J: Here's how I experience it right now: As parents letting the child go. The child says, ‘please let me leave the house, please let me grow up.’ And the parents: ‘we want you to stay with us.’ It's something about being a parent, it feels connected to my being a parent.

When the dynamics change with the same melody, with the same melodic rhythm it feels like the second one is commenting on the first one....That's a surprise in so many ways.

Here, what I got was tragedy, some tragedy had happened.

L: And here you were “trying to take it all in, trying to comprehend; make it a part of what it is now. “

J: Wow, I like that. I don't remember saying that.

J: Oh this is it (the ending), I just remember being so joyously giddy... yeah, this time it sounds different. I remember thinking it was slower. The first time through I remember thinking it took a long time to get to each note. But this time it was much faster.

I just remember my breathing, my body was just vibrating... There was also something about letting myself be able to feel painful things. And the music is letting me feel like it's going to be okay to do it. But I don't have a conscious feeling of that, I don't have a conscious memory of

that. I just remember feeling it was powerful. I don't have a thought of "oh, I am sad now." I just remember riding the music, my body was activated.

L: Now that you reflect on it, do you have any sense of what made it okay to let go, to ride the music?

J: Maybe knowing the piece as a whole was a part of that. I don't know. There were so many shifts in tonality (in this piece), I think it starts with C minor and ends with C Major.

J: Well, let's listen (listening to the intense orchestral climax before the end)

J: This is taking the things that we heard before, and putting it into this tragic...orchestration and harmony. There is a consolation in it. There is a consoling quality because we know it.

L: because you know it?

J: yeah. Something about this piece makes you able to accept the pain; you can accept death because it makes you live life more. It's something about this piece; I can't put it in words. It's in the piece, I mean, it's in me, but I think there are qualities in the piece that express intense emotion with the sense of completion.

L: and is it, (I'm going to be black and white) is it in you or is it in the piece?

J: Oh well of course, I'm hearing it; it's in me because I'm telling you how I hear it. But if 5,000 people listen to that piece and allowed themselves to experience the emotion of the piece, I think there would be some common element that we would agree on - there is a quality to the music. It feels like a philosophical question.

L: It is, I am interested in whatever philosophical thoughts come to you...

J: Well I do think there is something in that Spanish feel, the quality of this music.

L: That people would respond similarly to that Spanish quality?

J: I think so, maybe talk about it in a different way, but I think so, separate from my particular issues and my personality constructs, yeah...I think so.

J: I think the complexity of it, the ambiguities of it, helped me to get deeper into it. But it always had a clear melody. It always had something I could hold onto.

L: The complexity, how did that help to get you into it?

J: It was too much to reject. It was something that just enveloped me.

J: I just think this piece was really rich. It was a rich piece but I could live in it, I could understand it.

L: Where was your attention?

J: Well, there were times when I noticed a shift in my body, so my attention went to that. I noticed my voice got lower when the guitar went lower. I noticed my heartbeat. I noticed my breathing changed with that, there were things I noticed. I knew something was happening. My attention was always with the music, sometimes I had the imagery; you know the rippling water, the ice-skating.

L: By the way, I taped the session and made notes during it so it would be possible to go back and reconstruct the session with the score, and to hook everything up – what happened as you listened each time through. So there is record of the session, if you or I wanted to go into it in a more detailed way. But for right now, that's not something to do. . . This piece is from Helen Bonny's *Grieving* program; it's in the middle of the program.

## Appendix P: Nancy interview transcript

### Verbatim

N: I knew the music was familiar, but not enough to recognize what it was.

*Wagner Siegfried Idyll*

N: It felt like the music was so beautiful, lush, but yet it had room to grow in it. It wasn't so full that I was bombarded; it had beautiful melody, beautiful harmonies and counter melodies. It just helped me be moved forward, almost immediately. The timbre was lush, but not so full of harmony and so full of instruments that it was overwhelming, so I think that allowed me to have that sense of rising and growing. It gave me space to do that. I think if it was too full I couldn't have done that.

L: Then came the feeling of confidence and competence, and absence of worry. "The worries that I had before are not there, I can just do what I need to do."

Music playing

N: Listening to the way that chord was held there and developed, it was not quite grounded, yet I knew that resolution was going to come. Like hanging me out there a little bit - but that resolution is coming, and you know it is coming, and you can go with that. It had those moments of development so I could almost explore and then the resolutions – I could settle into the resolutions.

L: Like that hanging out there but you always knew that it was coming.

N: Yes. It was a piece that had enough structure that even without knowing the score, just knowing that there would be some resolution to this. I felt confident in the music.

L: Can you say then how you experienced that?

N: When I was in the imagery, it wasn't a conscious thing. I think that in that moment I was so into that feeling of being huge, that the music was just being there with me.

L: So you experienced it as being there with you when you were huge.

N: Yea, whereas later the music *was* the image. At this time it was more like being under the image and with the image.

L: And in your experience you felt that confidence and competence within yourself?

N: Yes.

Music playing

L: Next you had a sense of wanting to bring that into your mind and your body, but the music kind of held you back.

N: My body felt so giant and I had that sense of "yea, I can really do this." I really wanted to feel that in my heart and my mind and my emotions in that way – so it was more internal and less external. It becomes a little more gentle. It was almost like it was gently telling me it's ok. Instead of pushing me, it said, "just wait." The music sounds more thoughtful to me here.

L: So the gentleness just told you to hold it?

N: Yes, it said “it’s coming, and you might not be there yet.” It wasn’t even the sense that I had to be there today or right now in this session, it was more the sense of “you’re going to get there. Just let it unfold as it’s going to happen, don’t rush, don’t force.” Yea, don’t force. I think that’s the big thing. I think that’s what I felt in the music. It’s not forced; it’s so natural and has such a beautiful flow that it doesn’t need to be pushed. At the same time, the movement in the music is what gives that confidence. It’s going to go, it just doesn’t have to be that rushed, forced process.

L: So you can feel confident because it is moving forward.

N: Right, because even it is slow, it’s ok. Gentle movement is still movement. It’s not forced.

L: How is it right now to hear that in the music?

N: It makes me smile because on a personal level, I just want everything right now. I want to force through and plow through, and to hear in the music that there is still that motion and even this much progress is still progress. Even just a little step forward, I don’t have to do the whole list right now. It makes me think of life, I mean life isn’t over because I’ve had kids and I’m thirty-four. I know that sounds terrible, but that’s something that I’ve always had in my head that once you have children, you have to put all that other stuff on hold. And I don’t have to, the music kind of says that, even if it is still slow.

L: Then you said “the rest will come, it’s ok to move to it. Not all at once, this is preparation”. Then you said you had an odd image. “My outside is huge like dough, and inside is small and delicate flower. It’s just tiny and fragile. The outside holds and protects the delicate flower. It needs that giant soft “me” to grow. I have to allow myself to be here first. I can grow and be nourished. There is still much more”.

N: It all just ties perfectly together. So much of this can be paralleled to being pregnant, but it’s just so much deeper. It seems like that flower was almost like early pregnancy. That’s what it’s like to me. Like the flower is a tiny little fetus, but it’s not a literal fetus to me - it’s the *me* I’m becoming. I think that was happening when the music had more development because I felt like it was growing and swirling. It was all tying together.

Music playing

L: I think it was right here when you started feeling the growing.

N: Yea, it was all those trills and stuff.

L: So at this part when you really have that double image, that big outside and the flower inside. Is there anything you remember about the music?

N: . . . Not particularly. . . I remember that it seemed like a contradiction to say that I was huge but yet, tiny, tiny and delicate inside, because the outside was not delicate at all. It was big (like when you pound dough down to have that kind of a texture), soft, cushy, yet solid. If you think about working with dough, like if you try to rip it open, you really have to try to break that surface. You can pound it down, but you don’t break the surface. That’s what it was like, this big space. I felt like the Michelin Man, like that big puffiness. Yet in the core of it was this tiny space, I mean tiny. It didn’t feel restrictive, it was actually held in there. I’m sure there must

have been something in the music that brought that, but honestly I'm not sure what it is right now.

L: Then came the growing.

N: Yes, and that's when the development of the music was really unsettled and unstable, when all the trills were happening and it was kind of going all over. Not all over, but there were little segments of trills and then more trills. I remember that very clearly.

L: That brought, "the music feels like something is growing, not inside, something is forming, it's taking shape. I don't know how to say it, my awareness is growing. It's at the back of my head, the antenna is coming out, I'm seeing a clearer world. It takes from the world more deeply, it can be more open. It's bringing things into me".

N: It was like instead of just expanding out, I was taking things in.

L: So that was a shift actually?

N: Yea . . . This is where the antenna was coming out. I can't really hear the chordal structure. I can't tell where it's going and it really has a sense that something is morphing and taking shape. It really does have that sense that there is something different coming - like there's some point to it because you wouldn't write this for no reason. He (Wagner) has strayed so far from that beautiful melody that you know something good has got to be coming. . . I think it might have been here that it may have settled. I went "Oh!" I was taking it in. Still that sense of gentle movement to it. It gets a bit more insistent here but still not forceful. . . I was struck by the different timbres of the oboe and the English horn compared to the strings that we've heard before. There may have been more of that before, but that's what really strikes me now is going from that reedy texture.

L: Any sense of how you experienced that before?

N: It's a similar feeling from before, but now I'm relating differently to the outside world: instead of putting things out, I'm taking in. I think this is because the structure of the music is somewhat similar to before, but there's enough of a difference that it brought a different sensation (taking in).

L: Right here you were saying that "the antenna is heightening all my other senses, arms, heart, my arms are open and my chest. It was swirling before and now it's growing."

N: Yea, and you can hear it. That French horn melody is building, the instruments are coming in with it, it's kind of excited.

L: And "it's building strength, the flower is getting stronger and open"

N: That's what this whole thing is, it's coming up even with the crescendo and the pitch and adding instruments. Then again it settles into that familiar melody in a way that is stronger than it was before.

L: Any sense of how you were experiencing that?

N: I feel the strength behind that melody; that's what gave that flower strength. It's more accented.

L: At this point you also said "the music says it's not time to grow".

N: Right, the flower was just getting stronger, not growing.

L: "I'm becoming ready for the flower to grow. The flower is the essence of me and I'm excited to live. I feel lucky, there is so much life. There is more to do."

N: Again it's that sense in the music that "this isn't it, there is more." As I listen to the music what strikes me and what seems to relate to that is that you have these beautiful melodies and then these development sections, and there is always something coming after it that is even better than it was before. I don't know if I'm making that up, but that's what I hear.

L: That's what I'm asking you, to make it up.

N: There is a beautiful melody, development, and the melody comes back but it's a little bit different – more - every time.

L: And it's the feeling you said that there is always something coming that's better.

N: Yea, a little bit better or different every time it comes back. There are always these parts of development that are a little unstable and uncertain, but something good always happens after that. It's a little bit more solid a little bit more developed.

L: So the flower is developing, then you felt reassurance. "Having a child and a family doesn't have to limit me, it just adds to who I am, they can grow with me."

N: It seems like those were the associations I was making to that feeling. I don't know that there was anything specific in the music that brought that, it was more, "oh this is what this is telling me." Like I got the message it was telling me.

L: Again, "relief; it's all of us, I don't have to choose." Then, a little further down, the music got calming and soothing.

N: Yea, because it was tying up and resolving.

L: Calming, soothing.

N: Because it went through all of that development of the melody, and you can just feel it start winding down. That's what made me think you knew the end was coming, it was winding down, it felt nice. I felt like I was on it like a leaf. I was laying on it like a leaf.

L: Can you say a little more about that?

N: It was very lullaby-ish to me, it has that rocking feeling. I listen to it here and hearing all the melody instruments but there is always that solid bottom under it that carries it through. Those melody instruments sound joyful. I'm even struck by how the melody wasn't as solid but I still experienced it as very holding. I think that it goes along with all the bass tones. That chord is beautiful to me and how it's swelling.



L: You said that “it’s holding me and my understanding that life includes family, it’s not one or the other.”

N: When I’m listening to the melody it’s doing it’s own thing, but there’s always that underneath, and it all fits together. I almost wonder if I’m relating to me as the melody, but yet my whole life is that, everything together keeping it gelled. So even when all those instruments were doing their little things, there was this sense that we are all moving through this music together.

**Mozart** *Vesperae Solemnnes, Laudate Dominum*

L: So now comes the Mozart. So anything about the music or how you were experiencing it?

N: I remember those moments as it was kind of forming with me, again still noticing that nice solid structure. Those bass notes just really “BOM” and still movement and you hear those layers of movement from the slow bass line to the middle arpeggios and that beautiful, smooth melody on top. So, there’s all these layers of movement and I think that’s what I’m really responding to. It’s that sense of movement on different levels yet they all went together. As I hear it that’s what I’m struck with.

L: How they go together?

N: Yea, they are all moving with a different rhythm or pace, yet they fall into that beautiful structure that just keeps it going all together even though all those voices are different.

Music playing

N: I remember the voice surprising me at first, but it’s perfect. I didn’t expect the voice.

L: So you were surprised?

N: Yes, but it was a beautiful surprise like, “yeah”.

L: And how did you experience that?

N: Well it took me a moment to figure out who the voice was to me. It was *so* beautiful, that for a moment I thought, “well, that can’t be me.” It can’t be because it’s so beautiful and so perfect. But then I felt like “am I being sung to?” I was really just trying to be with that voice. Who is that voice here? I don’t know what happened when I realized it was me, when I finally said ok and let it be me, I guess. It’s such a beautiful tone. I couldn’t put it into words: it’s not a purity, it’s the clarity of the sound of her voice that I really responded to because it had overtones and it had a richness to it, and to me purity and richness don’t quite go together. So I felt it’s the *clarity* of the tone and the pitch. It’s just *so* perfect. There’s no sliding, there’s some vibrato but it’s not that overwhelming vibrato. It just is the perfect, to me, tone in that moment.

L: So your sense is that you were so attuned to that tone, experiencing that tone.

N: Yea, and behind that tone, the tenderness. Like it was sung with such love and tenderness. A lot of that came with the expression and the dynamics, and then, in the very beginning even, her breath. The first time listening to it, hearing her inhalations I really connected to them. I'm not sure why. Every time I could hear it, and I remember once I didn't hear it, and I was disappointed that I didn't hear her inhalation, I wanted to. I don't know why.

L: Actually you said something very clear about that. I think you felt her voice as full, and then her breath, and then you really felt the depth of her deep breaths.

Music playing

N: The instruments are definitely important, but it's really that voice. I don't think I was even paying attention to the accompaniment. It was the voice.

L: You said "it's me looking down over my world; singing over it; my arms are around it. I'm singing to it. It's nurturing my whole world."

N: At first I was looking at it, then I realized I was holding and singing to everything that's me.

L: You were experiencing it as if you were singing?

N: Yea. The first time through I was definitely singing. I just would imagine what my face would look like as I was singing this. You know that expression in the face. I don't know what the words are, I mean I knew it was religious, but I didn't know anything else about the words other than how my face must look as I sing so tenderly to my world. It was very mothering, like I'm taking care of everything. And I'm doing a good job. It's really beautiful.

L: It's like an infinite sort of mother. It's one giant mother.

N: Some of the associations I do have, being Catholic, is the Virgin Mary, and the idea that she's the mother of us. That's kind of what it felt like, it had those religious overtones that I'm a mother of all this stuff, and it's beautiful. At first when I heard those voices (when the chorus came in), I was like, "no, I want to hear my voice more," but then I just kind of let myself feel what they were giving me.

L: So you had to deal with that?

N: Yea, I didn't want them at first.

L: So how did you experience that?

N: At first when the voices came in it almost felt intrusive even though it was very gentle. I just was so connected with that voice that I wanted that to keep going. So I said "let's just listen to what the other voices have to say." Then I heard the richness in their harmony and they were so supporting when I was singing, and it became ok.

L: It became ok and less intrusive?

N: Yes, and I didn't hear my voice when they were singing. At first that bothered me. Instead of letting bother me, I took it as, "wow, they're really supporting what I'm doing here, and they are telling me that I can do this." It's not the voices that tell me I *can't*, it's all the voices that tell me I *can* - and that's what I need. I don't need the other ones. These are the voices I want to connect with and what I need in my life, not the ones that tell me I can't do these things. That was really important to me.

L: "Nurturing my whole world, they say, 'yes you can do it all.' The voices that say I can't aren't here. I can carry this world in my arms. It's great love and a sense of motherhood - not only of a child, but of everything: me and my whole world."

N: I think if those voices hadn't come, I don't think I would have experienced that sense of confidence as strongly as I did because I think I have been so susceptible (in reality) to all the people telling me that I'm crazy. Hearing those voices support me was really important. At first I didn't want them, but when I realized what they were doing in that moment, it really took it to another level of release and relief. It was nice to be told I could.

L: By other people.

N: Yea.

L: You were already telling yourself that you could, but then they guided you.

N: Yea, it really helped. It helped to make me feel more confident.

L: So that was the first hearing of Mozart. Can you say anything about how you understand your experience of the music in that first hearing?

N: I think those moments of surprise were so important to me even though I know the piece: the moment of surprise in the voice (then that deep connection with it), and the moment of surprise when the chorus came in (even though at first it was unwelcome). So it was those unexpected things. The harmony and the accompaniment doesn't really change [in this piece, it's the voices that change]. So I think those surprise moments really moved me forward. Also, when my voice - the solo voice - comes back *with* the chorus; that was important, too. So actually, it was the idea of "myself, the group, and then me and the group together" that was meaningful to me. I think the fact that it was a female voice was important; if it had been a masculine voice it would have been a totally, totally different experience.

L: So your identification with the voices is very clear. Then what felt very important was that they were a surprise. Those moments of surprise were particularly important.

N: It's like it kept me going in the process. . . Those moments of surprise kept me moving through the process. Movement, I don't know how else to say it. Again, "there's more coming, there's more coming, there's more coming."

L: If you look at this hearing of Mozart and you think about the experience with the music from the first piece [Siegfried Idyll], is there anything you can say about that?

N: Yea. That's really what the connection between the two pieces is: even though they are so different they both have that sense of movement – they're always moving forward. In the first piece, it was done with development and the melody would come back differently each time, in the Mozart, it was little nudges with the change in voices that kept my imagery flowing and kept the process moving. Does that make sense? They did it differently, but both in ways that just kept me developing my own experience. I think that if had just ended with that solo voice and that was it, it would have been wonderful, but it would not have been nearly as deep.

### Music playing

L: Then the Mozart repeated again. So then you said, "I hope I can always have that sense of beauty and love. A sense of reverence and awe, a feeling of being blessed, it was huge."

N: It was like the more I heard it, the deeper it got. And the deeper it got, the more outside of me I got. That idea of reverence, to me, comes from outside in and that's what it felt like - like I was connecting beyond me at that point. Because at first it was just me and my world and those voices helping me. I kind of see them from behind, around me, helping me - almost like that blue [from the mandala] underneath me. The second time it felt like connecting upward – the second time brought the connection to what I was experiencing outside of me. The second and third repetitions, I wasn't singing. It was still my voice, but I wasn't actively seeing myself or feeling myself sing it at that time. It was almost like I could receive it more when I experienced it that way. I could hear it more, I could take it in. Yea, and that's what it was. Instead of me nurturing out, it was almost like the second time when I wasn't singing I was taking more in from it . . . I was surprised by the fact that I still wanted to hear it a third time; that it felt ok to keep hearing it.

L: Do you remember how that felt?

N: I just wanted more reassurance. It was such a positive experience and I just wanted to hear it again. But I knew by the third time that that was enough. I was glad when you stopped. I thought, "this is right where I need to be". Because again, I got deeply into it and each time I got something deeper from it. Even though I knew what was coming by the third time, it was almost in that predictability that I could go deeper with it. I knew those voices were coming, I knew she was coming back, I knew that the solo was going to come back, and I could just take it a little deeper every time. On a cognitive level that surprised me because I thought "how am I going to keep working with this, those little voices that sometimes come in?" I just opened up and they just came deeper every time.

L: You were clear about when you wanted more, and you were clear about when you were done.

N: Yea. I knew I was done, I just knew "this was where I needed to be right now."

L: We'll go back to that. So then you were explaining, "it got huge, it came more outside." You said, "I can feel it close to me and help it grow. This is my voice. Singing helps it grow." Helps what grow?

N: My ability to hold my world. It's my ability to nurture and love my world, it's not about the flower growing.

L: Yea, the feelings were growing. Then I asked you to describe the voice and you said, "it's the love in me. It's the confidence in me. It's coming out. It draws on my inner confidence. It leaves behind the doubt and fear." Anything you can say about the music from that?

### Music playing

N: This is where I was really able to articulate the clarity in the voice that struck me. I think it was the second time that I really felt the clarity, and it was because her voice was so clear and there wasn't a lot of ornamentation. That's what made me feel clear in my confidence. That clarity brought out my own clarity. I think if it [her voice] had been really operatic, that wouldn't have happened.

L: So then I asked you to describe a little more. Then you were describing "it's like it comes from so deep." You heard the quality of the voice come from so deep. "That's where my pure heart is. It goes right down into my heart, even though it wasn't exactly a heart, and then it brings it right back out. It comes right back out. I sing out."

N: Yes. It was that the voice comes into me and then I come out with it, as well. And if I have to think of what the heart is, that's the flower - Like it [the voice] comes into that space where the flower is. I don't know that an instrument could have done it the same way as the voice. I couldn't understand what she was saying and that made it even more because I could put my own meaning behind those words (instead of knowing what she was actually meaning).

L: Anything else you can say about how you experienced the music as it was going down into that flower part and then you were singing it out?

N: It was all voice; the accompaniment was there, but it was definitely all voice that was coming in. It would come into that place and would come out of me even stronger. So it came in with that clarity, but then it would draw out of me what made me feel strong and confident. So it was like the beauty of that voice, the clarity of that voice, could bring it right out of me.

L: When the voice went into you, was it the singer's voice?

N: No it was still mine. . . Even though I wasn't singing, I identified that as being me.

L: so it was you coming in and then it would draw the deeper part of you out of you and then that would . . .

N: . . . bring it out to the world. I think I remember, I think it was this time, feeling that that's what I wanted to project into this world. That's the true me and it's the me I want people to know. I'm always connected to the unsure me ("I don't know my way out"). I do know my way out so why not put it out there? Stop being unsure of your decisions!

L: As you say that, that's so profound! In thinking about the music, do you have some understanding of how the music got you to that?

N: That's a hard question to answer because I have ideas but they're just impressions.

L: That's exactly what I want, impressions.

N: I think especially because I heard it a second time and I knew what was coming, it allowed me to be more confident with how deeply I went into the music. And, again, the structure of the music as a whole gives confidence to explore. It allows you to explore because you always know it's there, you always know it's going to hold you there. It's not just going to leave me out there hanging. I had such confidence in the music to bring me through it that I could let it get deep in me and know that I can manage it and let it back out.

L: Yea, it gave you the feeling that you could manage it. The structure gives you the feeling that you can manage it so then you allowed it even more.

N: Exactly. I knew what was going to come. I always had a sense of how long I had, too. Sometimes in music you don't know how long you're going to have to be in a place, so you start to protect yourself a little bit. I didn't feel like I had to protect myself because I had a concept of what was going to happen.

L: Let's go forward. "It reminds me of who I am. The negative voices, that's not me. That voice is what I need for me, and to put out into the world. I want people to know that's me. I want it to emanate from me." And that's exactly what you said. So let's go to the third repetition then. At the end, I think I asked you if you wanted it again and you said yes.

N: Yes, it was a very clear, no hesitation.

L: You wanted more of that affirming . . .

N: Absolutely, I wanted that voice again. I just wanted to connect with it again to make it even deeper to make it stronger.

Music playing

L: So then third time around, "What I love about the voice, it's pure but full. There's so much behind it, motion, color." And that's when you got it's clarity.

N: Yea, so it was only the third time, wow. I thought I knew that earlier.

L: Actually you had said it was pure; then here you finally used the word clarity. Yea, “there’s so much behind it, it’s clarity. I want to embrace that clarity.” So it was then that you really arrived at that. You got the word for it.

N: Yea, it took three times and I finally found the word for why that voice meant so much to me. This delivery is so confident yet, beautiful, tender, loving, but so sure and I think that’s really what it was about that voice.

L: Then as the voices came next they were hands, “these voices are hands under me.”

N: Yea, the chorus.

L: “I’m perfectly confident in them. I know they’ll hold me.”

N: Yes, that’s really what it is. They were underneath me and I was off the ground for sure, but I wasn’t at all worried. I knew they weren’t going to drop me - they weren’t going to weaken. They were going to be there. During the first hearing I don’t think I could have experienced that. The third time when I knew what to expect, I knew they were going to hold me there. Then I could sing with them like that.

L: So then the third time around you felt that you could sing with them?

N: Yes, and they would hold me up.

L: And you didn’t have that feeling the first or second time around?

N: Not that deep. They were supporting me but it was from behind. This was an actual holding up.

L: So it moved from behind to under.

N: And up - and that’s important, they were lifting me up.

L: And up, that’s what’s so significant in your drawing.

N: Oh yea, right.

L: So that’s movement, too. It’s a different form of movement.

N: Yea, because I went from the moving forward. This was definitely the feeling of moving up.

L: Then that was you saying thank you, “I feel you, I hear you, thank you.”

N: And that’s when I finally realized she was saying “Amen.” Maybe that’s what gave me the sense of closure now that I think about it. That was the first time I realized she was singing amen, and they said amen. I bet that’s what it is.

L: And that's what you end on.

N: And I could be thankful to them for holding me up. Yes, I think the amen was what gave me some closure now that I think about it. GIM is so cool.

L: So can you express why you're saying that? What's behind that?

N: This might sound so bizarre, but just the whole idea that when this music was written it was not made for this - it's not its point - but it so perfectly imitates life in so many ways... also, how you can take whatever you're experiencing and relate it to something in that music. When you're in the altered state it's so unconscious, but then when you sit up and listen to you it you think, "well I should be doing more of this." This is because now I hear so many more parallels in what the music was doing and why I was experiencing that than before. It's just so awesome to me that it can do that. Just that right music can move you right into a process of gaining an awareness and an understanding that wasn't there before. I'm in awe that that can happen and I have more appreciation for this music that we work with.

L: Me too.

N: I know, and I feel so much stronger now that I normally feel - like "wow". And I think as we said earlier that for me right now what really made this work was the structure that I knew was there, but that constant movement forward really is what brought me where I needed to be. And I wouldn't have thought that hearing a piece three times like that would be so meaningful, but clearly it was. I don't think I could have felt it as deeply if I hadn't heard that piece three times. It kind of opens my mind to a different way of using the music.

L: When you were listening you were aware that it was the same piece? Yea, of course you were.

N: Yea, absolutely. And I wanted it to be. I was glad that you played it a second time and I asked for the third time.

L: Were you aware at all of the interventions? Would you say anything about the interventions?

N: I think giving me permission to go deeper into things and to open, like you used that word a lot "open yourself to that," like yea ok you're feeling this so let's take it a little bit deeper; a little bit deeper every time. And you used that a lot and I think that was important for me to just let myself be with it. I remember you directly asking me about the music a few times. Again that just helped deepen my connection with the music when sometimes I was starting to get, not away from the music (it was always there) but my awareness of the music wasn't as intense in those moments when you had asked that. And it helps remind me that it's through the music that this happens, not the imagery; and it shouldn't be just accompaniment all the time. And I felt like, in a lot of ways, it was educational as a guide, even, to remind me of those things.

L: So what does that say to you in terms of your relationship with music or guiding?



N: It really says a lot to me about my responsiveness to the music. That even when I'm not aware of all the nuances that it has such a profound effect on what I'm experiencing. And I don't even know it. I think that's the awesomeness of it that I didn't even realize it until I sat here and went "oh yea!" And it just strengthens all of it. It strengthens my love of this work and my desire to do it. It's just incredible. I'm just in awe right now of this whole process.

L: That's why I'm studying it like this - to have the session and then to go into it again. Just looking at the music is very strong.

N: Yea, I don't think I realized how much.

L: So in this interview what is new for you today?

N: What's new to me is truly how influenced I was by the music - much more than I thought. I think I previously thought on some level that in GIM the music gets started, and it gets in there here and there; that the image kind of flows as it's going to flow based on what's happening internally. But now I think it's much more connected with the music than I was realizing before. I think the music is what brings out the internal and not visa versa - not just accompaniment but much more connected to the imagery process than I thought. Before I kind of just thought the images flowed one after the other and when you got into imagery that's just what happened, but no. I really think the music is so much more tied than I ever realized.

L: And what did you say? The music . . .

N: . . . brings out the internal and not the internal on it's own with the music behind it.

L: Is there anything else that you would like to say? Anything else that comes to you?

N: I think I'm just awed by the responsibility (talking as a guide) - just when I thought I was kind of getting an idea of what I was doing - of music choice. It's kind of reminded me, and I usually think I do an OK job, but it's really reminded me of the responsibility I have when I choose my music and what it may or may not do for a client. And I have one client that I think I'm not doing a good job choosing her music which is I think why we're struggling. So I have a lot of homework to do and that's a good thing.

L: Do you have any questions for me?

N: No.

L: So you feel satisfied?

N: Yes. I feel great.

**Appendix Q: Deval interview transcript**  
**Part verbatim, part summarized**

*Bach Prelude in Eb minor*

L: So right away, there was a big open meadow; there were bright colors; the meadow became upside down, concave

D: It was like a big upside down bowl.

L: I asked you how you experienced the music and you said, ‘Its openness,’ and there were bright colors, then you started feeling some heaviness.

D: That was when the bass came in, specifically when later on in the piece when the bass comes in. I know this piece really well. In fact, when it first started I was thinking, I was so surprised to get the image right away because I had so many cognitive thoughts (I wonder if this is the Stokowski, etc) and then I got the meadow... which I liked, because it just shows the power for me in this method. I mean, I don’t know anyone who has more cognitive ways to approach this music than I do. But through that whole armor of cognitive knowledge of the piece, I could still be open to it; it could still impose an image on me. The music just erased the cognitive thoughts. It was: “Who cares about that? Pay attention to the meadow you’re seeing now.” I have had some GIM experience; I know how to pay attention to what you’re doing, and I know how to be a “good boy” in GIM. But on the other hand, there was no work, a little bit was like my earlier experience (in GIM), like: “Oh god, I know classical music so well. What if nothing happens?” And then, not only did something happen, but some really continuous thing happened.

L: So when it erased it, then came the image in the meadow?

D: Simultaneously, the meadow just came, and I just quit thinking about all that other stuff because it wasn’t important, now there was a vision to work with.

D: The music was very full and bright; that’s that whole brightness of the meadow. Cognitively, I think of Eb minor as a very dark key, but I experienced it in that moment as being very bright.

L: and then it got a little heavier; you found the ground; then you have a sense of distance and that’s when the bright light started; it turned into a figure in metal ...

D: Metal clothes, metal lamé would be a good way to say it. At first I didn’t know what it was, it was like when you see someone’s arm or their thigh and it was reflecting the lamé and it was moving. That’s what the light turned out to be.

L: Let’s focus on the music. What would you say about the music?

D: I actually think it connects to the color of the violins; the high violin color. The tempo has a great deal to do with it too; it’s very slow, gives that sense of space; but especially the brightness and color of the violins.

L: I asked you what you heard in the music and you said “open, awareness.” It made you start to look around the meadow. The beings were running around the space to the left, and there were other beings in the forest.

D: and I purposely didn’t say animals or humans, because they were neither. They were some sort of spiritual beings.

L: Any thoughts about the music in particular perspective as you are thinking about the music now?

D: There’s that spot where the bass takes over. It has the melody for a while, and that’s where I mentioned the darkness - where the basses took over the melody was where I became aware of the darkness. Bass, dark; you know. The cello/bass sound in that recording is just really luscious; a dark, dark green kind of color. Music is so colorful for me, and the natural world is so colorful to me, so that’s a really easy instant crossover.

L: So it became dark; and the openness?

D: The openness I think still just has to do with the tempo, it’s just so full. I mean with a tempo like that (snapping slowly), there is an awful lot of openness.

Music playing

D: It could be the harp strokes, too that could be the little bits of light... I think also an aspect of the openness in this is the way that this conductor is giving the music a lot of space to develop. There are big rubatos; very little churning up of the tempo; mostly the rubatos involve leaving lots of space for some music event to have its day. And I think that has to do with the space too. Having played in orchestras I also know that you can put a beat out there, but it is how they decide to play it...

L: Let’s listen to the transition to the Beethoven

***Beethoven Violin Concerto, movement 2***

D: Actually, I didn’t recognize the piece at first. My first thought was “this is very ancient music,” and that came to me in those words. What it really meant is that this is music I have known since I was a little boy - indeed this very piece, the whole violin concerto, the slow movement ended up being very powerful. One of the inappropriate things I was asked to do as a child, was to sit with my step grandfather while he was beginning to die. No one else could be with him at home; people had to work. So I would just sit with him, and I had this recording of this piece, and I listened to it constantly during this period. It was the only thing that made it possible, it was like resourcing to find “how am I going to be with this man?” He wasn’t a blood relative, I mean my grandmother loved him very much, and so he was definitely part of the family, but I was very conscious of the inappropriateness of being asked to do this. I was in fifth

grade or something, really young. Here, I was listening to it in this environment, in this space, quite separate from everything else. It came to me almost as if from billions of years ago; that kind of sound, you know, “this is very ancient” is the way it came to me. And the other thing is, this is a holy piece it continues to sustain, to heal.

L: The first thing it brought was silvery blue light. “I’m in the light, above the meadow,” and you mentioned the mist and the beings, like wings; there was a feeling of awe; they were high up, to the right of you. So that was the first thing, silvery blue light, awe struck viewing of those wings.

D: That music is like a hymn. It’s very simple and the homophonic structure is just so clean and far away; pianississimo at the beginning so far high up. Register-wise, well the beginning was so quiet that you don’t hear the bass fully, and so it does seem high up. And then of course when the violin comes in it’s an astral register practically. It’s only accompanied by the fiddles. That, and the beautiful breath that’s in that music, you know the (singing). You know that breath that’s in it gives it that sense of awe: “what I have to tell you I have to tell you slowly and carefully because it’s awesome.” So just so much of the quality of the music itself is really in there if you make me think of it that way.

L: Well, I’m opening the question as to how you are thinking about it now.

D: This is *now* how I think about it because *then* it was just doing it.

L: Then it got more vast and your attention came to the space. It was a vast space. You could see forever. And then the feeling of being held up by the wings.

D: And at the same time in this passage, what I couldn’t say was how profoundly moved I was. I began to hardly be able to breathe. I had to say to myself it’s ok to breathe - because it was a little bit like the feeling of being overwhelmed with grief that I get- when I can’t breathe. Often, I’m teaching and I use a piece of music and I realize, oh dear it’s touching that spot and I can’t speak. And of course it’s noticeable because I’ve been speaking up until this moment and then all of a sudden it’s like I can’t speak because if I do I’ll just fall apart basically, you know, and sob and weep.

L: In the experience obviously your attention was on that image and that feeling. Were you aware of the music? Can you say what your awareness was of the music?

D: Yes, when there’s that big surprise chord that is just sort of like *roar* underneath you - that was when I realized that I could hardly breathe because I was so moved by the totality of it though, not by any one thing. That was the interesting thing. It wasn’t like a certain thought but just the totality of being surrendered in this place to that music at that moment was just really

L: And you have a sense that that came when that surprise came?

D: In moving into it, yes, I know the piece so well I can ride it. I know exactly what’s supposed to come. That’s why I said you spared me the really big cataclysm that comes (after the excerpt

you used). I was steeling myself for that, as a matter of fact. I thought, she doesn't want to go there either.

L: So it's expanded, held up by wings. This feeling is getting stronger. That's where the sense of the majestic being started. You were carried, you were really small but really safe. You didn't quite know what it was, but it was holding you on all sides. It was soft and you were aware of how you were kind of free to move; like it was firm but free and very soft; and you were very high.

D: I'm thinking now about the high tessitura filigree; the violin that so freely moves around the supporting of the orchestra. The orchestra is still playing the hymn, but the fiddle's going in and out swooping up. That freedom is definitely in there; that's part of it. I'm a violinist so I know what it takes to play this piece and also to sustain it spiritually. When you're playing you have to be in it, but also in control of it technically, so that you aren't pushed over the edge by how beautiful it is. That's another level of control, not just technical, but a kind of spiritual control that you have to exercise while playing this piece because it is transcendently beautiful. So all those things are playing in there and they're not at all what I'm thinking, but I can understand how they could play into my experience. That's all part of the whole story. The coloratura sort of turns and twists and everything gives a floating quality and going ever higher and higher. I think that is the case. Now I want to go to the score and find out. It starts at the first utterance - the fiddle goes quite high, but over time, he keeps topping it. So it does keep going up and up and up. I'll have to check that out and see. It's just a thought of whether that's truly happening. Then there's the mixed modes part (singing). You know the Ta Da is a disturbed heart, I always say. A regular heart goes Da Da, Da Da, but a disturbed heart goes Ta Da, Ta Da. So it is dramatic. When your heart gets a shock, it goes Ta Da you know - it skips a beat as they say. And then there is the mixed modes; they're borrowed from the minor mode so its really disturbing. There's some disturbing material there for sure. But there's still this majestic pace in a place of complete control. So *held*; you can even come to the awful majesty of whatever this is that you're approaching.

L: Do you have a sense of how you experienced that dramatic, that strong disturbed part?

D: It was like a shock. Like when someone takes your shoulders and shakes you..

L: Then came the image of the cloak; the beautiful folds, it actually turned into that fabric and it was held up in front of you.

D: Off to the right hand side.

L: Let's go a little more forward.

### Music playing

D: So this is the completely supported energy. There's that G pedal that's being held down there. G is soft and green and holding and all those kinds of things. And what the violin has to say, it has to say some very tender things of these appoggiaturas. So (singing) not the *right* note yet, but the *wrong* note that's going to be painful against the right notes, like that one. The appoggiatura's part of the melodic configuration of this passage.

L: So how did you experience those wrong notes?

D: I say wrong, but I mean it's like a twist here, and they wouldn't have that power if you didn't know what the right note was supposed to be - the note that's being decorated, in other words. I claim that the emotive power of those notes comes from the fact that you know what the right note is. There's no mystery at all. And being made to wait for it in just that way is where the locus of the emotional power that that delivers. Something like that could go by in allegro and you would think "Wow that's cool," you know, flashy fingers. But in adagio there's time for it to actually register in you. You know the pull of that C# to the D; it's not the right note, but it is the right note because it's the right "not right" note.

L: In the postlude and in your experience you were so completely patient and you experienced those wrong notes, those twists.

D: The dissonances, yes.

L: But, not in an anxious way. You know what I mean, it didn't push you.

D: If everything goes right in life, what sort of life is that? Things have to twist a little bit and turn and hurt a little bit so it makes you feel more alive somehow. Windham Hill music, new age music drives me nuts because it's absolutely laundered of dissonances. Or the ones that are there are just sort of, who cares? Whereas, these I care about.

L: Do you have a sense that the dissonances brought you into that experience of being more alive?

D: Absolutely, and not only that but if you think of the things that other people could look at in you and say, "oh that's a flaw," but instead you realize no, that's where I just need some extra support. At every moment where I could have fallen, or where the motion was so gentle I never had the sense of being in danger - not for one instant, not one instant. I was very moved all the

L: So what's your sense of how the music contributed to that?

D: I can't help but think it's because I know the music so well and there's no corner of that piece that I don't know what's around the next corner. That's part of it. But, this way of experiencing the music puts the accent on the present moment. So I don't even think about what's coming. You know that feeling of "just take me, I'm with you; whatever you're going to do, I'm there with you too." In a sense from my side, I was permitting myself to be moved by the music in its instantaneous quality rather than saying, "ah yes of course that's a 9-8 suspension," cognitively working on it. That's such a fine line for me because when I say 9-8 suspension, I experience something. Those words aren't cold, analytical words for me - that's a feeling. It depends on which intervals it involves because I've trained myself to do that. I've been trained and then I've trained myself some more.

L: In the experience did you feel you were anywhere near the cognitive framework you usually have?

D: No actually. Quite far from it; quite far. I was listening like the little boy who needed to listen to it when his grandfather was in serious health. At the same time, I was listening like the

person I am right now who needs to find the depth of the music without words, without concepts. It's difficult to describe because the words are always there, they are just names for feelings for me anyway. I can emphasize the name and I can teach you about the name, I can teach you how it's structured, where to find it in a scale all that good stuff, but *really* what I'm talking about is feelings that I have. So for me it's always very present and vibrant that way; really hard for me. I beg my students not to write a single note without trying to hear something. And they say, "oh we won't hear the right notes," and I say "that doesn't matter, it's the will to hear it that will create the right notes; without that will nothing will happen." They look at me like I must be nuts.

L: So I'll move forward a little bit. The cloak was put on to meet that being. And you were so thin like a thread; totally high, totally supported, totally thin.

D: And I was a thread of light. I had been drawn out into a thread of light and there was no effort involved. It wasn't like someone had to stretch me or put me through a mold or anything like that; I just became a thin thread of light.

L: So what about the music with that?

D: Again, I think that that has to do with the thin thread that the E string is on the fiddle and how the music just goes like this and this and this and this ever upward. I think it's very much a picture of the violin sound - even when the fiddle ends up on the low G string. When it's played alone in the practice room that sounds like a fiercely low note, but here, in the context it's in, that's like in the upper middle of the whole thing.

L: I'm going to move us forward.

D: What a great piece that is; aaaahh!

L: I know it's amazing. I brought your attention to the music again and you said "the music brings openness," and then there was a door and the light was coming through; apricot gold pink soft light. Then you started to have the sense that you saw it in the distance too, and then it became the path. So it was a light but a path also.

D: This is where the fiddle breaks into sixteenth note sextuplets (singing). And meanwhile underneath it's just opening up like crazy, just the orchestras like *woooahh* getting bigger, richer, fuller. The red chords are associated with minor chords and things borrowed from the minor mode. The fact that it was apricot means there is probably some Eb in there somewhere.

L: Then the colors started changing right there because the beings with wings were there and there were colors of night: gray, blue, and they were keeping you focused on that apricot light on that light.

D: Because I was getting higher and higher and so I could get into this celestial dome.

L: And you were being gently turned and rocked and you had grown to the size of a pencil. You were always focused on that light. That was at the end of the first hearing.

## Music playing

L: Anything you can say about the music in that part and as it came to an end?

D: This is all ending. Music-wise it's ending. As I always say when we're talking about form, the "business" end of the piece has already happened; this is just spinning out this incredibly slow energy of the music. It's done now, and so I rise and I can look back over it. Business has started right here again (referring to a phrase), but it's just the thread of business and I'm still way up here.

(Music ends) And here's a shock; that's the one that you wouldn't let me have (singing the transition to the next movement). I was getting ready for that (the next movement) physically because that was going to practically knock me off the couch - because that would have been strong at that point. And then you didn't let me; part of me said thank you.

L: So you were preparing yourself inside for the strength of that, and what happened when it didn't come?

D: At first I thought, "She's not going to let me have it!" And then I thought, thank you; then I thought, "Now what?" And when you started again - was that the beginning of the piece again?

L: It was the beginning it was the second movement again.

D: That's what I mean, but it's such an interesting phenomenological thing because heard the second time it was as if it was taken from the end of the piece. In other words, you had just skipped a part of the piece. Because I didn't hear it the way I *first* heard the first sounds at all. I teach this, that it's not possible to hear the same piece the same way twice and really that was the perfect experience of it because for me it was not the same music as it was in the very beginning.

L: So how did you experience it?

D: Well I experienced it as familiar. I experienced it as if it were after the shock (of the transition to the rondo movement); that you had skipped the shock. Then that set me to ponder for a while, but then the images started pulling me back out of wondering what the hell was going on and just paying attention to what I'm seeing. So it almost derailed me.

L: That's fascinating.

## Music playing

L: So then it came on again and then you said "this is a higher place than before."

D: See what I mean, I heard it as a different music.

L: Now there's structure.

D: That's right, it was some baker's creation essentially. It was a cylindrical tower and on top a turban of meringue. I don't know how to describe it, but it wasn't solid - it was insubstantial. It



was made of mist and light, and it was off to the left side. It seemed like the path that I had been on had wound beyond it. At first it had been off to the left, middle left. I *am* the path, and I'm on it and I'm now as thick as a pencil (what I mean by a pencil is not as short as a pencil, but as thick as a pencil). It looked like this path was going to go over beyond this thing, but then maybe the path turned because it seemed to move. Then I was really walking into it. So that was an interesting vision thing that happened.

L: You said there was vapor and light and you were being beckoned. It was gesturing to come towards the turban.

D: Yes, there was no person gesturing, but somehow there was a sense of "come, come, come in."

L: And everyone was in agreement, "yes yes it's ok." And you got shuffled by the wings.

D: This was tacit agreement. I don't know how to describe this - the communication that went on in these visions was not verbal, but it was certain.

L: Like without question.

D: Without question there was an agreement in a sense: yes, do this.

L: So now you're in this piece of music that you heard before. Now you're experiencing it in a different way.

D: Except I'm experiencing it as if it were not what I heard before.

L: So can you say anything more about that now? The structure is there and you go towards it?

D: And I go in. And I'm inside this room that's covered by the turban. And first it's like this big room with vapors and lights and then after a while the sky opens. It's as if I don't remember it opening, I just remember becoming aware of the fact that it was open on top. This isn't the only open on top GIM I've had either - so that's kind of a motif. You think there's a roof, but actually you can go up through it. You can see through it or go through it, or that sort of thing.

L: So what would you say if you think about the music? Any thoughts you have or impressions. Music playing

D: You know I have to say the tempo sounds different than the first time. Everything sounds different than the first time.

L: How so?

D: It's warmer, it's fuller, it's a little faster. Isn't that odd. But as I experienced it really progressed, you might say; something beyond the first thing. And now as all this opens up, one recognizes familiar things but as the fiddle starts going up high, that maybe took the attention to go "oh look it's open up there." Where did you end?

L: Same place.

D: Go on. Really?

L: Yea.

D: Oh for heaven sakes.

L: So you had a second hearing all the way. This would be the same exact thing.

D: Wow, amazing.

L: What's . . .

D: There's something way beyond the cognitive level going on.

L: Yes, and I'm interested. What impression do you have? It's surprising to you . . .

D: I mean theoretically I believe this, but to have such a direct experience of it. I have had the experience [previously], but seldom in the space of, what is it, ten minutes. We listened to eight minutes of it and then we listened to the same eight minutes of it again, and the second eight minutes didn't sound at all like the first eight minutes, though it was.

L: So what does that say to you about repeated listening?

D: Well that some sort of transformation goes on in us while we listen. I'll just put it on me. Some kind of transformation goes on in *me* while I listen, and I'm actually not the same person from having interacted with that music if I listen again. Even when I study music, a lot of times I'm trying to hear things and hear them again. It's a piece I've listened to five hundred times and I listen to it five more times and I have six more things to say about it that I never had before. Listening is like that because *we* change.

L: So what does that mean for you?

D: In a sense that even if you feel stuck, you never are really stuck because you're always digesting, you're always changing. Something's always going on for you. So being stuck is an illusion; it's a kind of fixation on something that isn't even true. It's not even possible that it could be true.

L: Because even when you're in the same piece . . .

D: you can't even stick to the story. That's kind of a cool thing to carry away. And that's such a musical thing too. My violin teacher in Vienna said, "there's no such thing as a repeated note." And then he explained it, but it really made me think. It was an outrageous thing to say, but it's really true.

L: Anything else about that or just any other thoughts?

D: Well about that idea of repeated notes: so often we get to a place where we're stuck again, a depressed moment, this sense of "oh, not that obstacle again," when actually we were just coming around to a same *kind* of music, but it's not *the* same music. Sure, we would recognize what movement we just listened to it but it didn't sound like that. Somewhere in there, there is a bit of wisdom to pull out about when you're down or when you feel stuck.

L: There's like a psychological metaphor: feeling stuck is like being in the same piece. Right? It would be like playing something over and over again and you would think you would feel stuck and maybe you would feel stuck.

D: Except here's plain old truth that truly played music is never the same. Truly listened to music is never the same.

L: Truly listened to, maybe that's a way to say it.

D: Yes, so often you know you don't really listen to yourself either. The internal dialogue goes on: yada yada yada; but actually it's not "yada" - it's always something different, there's always another little turn, you could figure something else out.

L: So if I apply that to the psychological metaphor that would be saying that if you're in a depressed state, but you are truly listening to yourself, you might be saying there's still something there? If you're truly listening to yourself you wouldn't give up?

D: Don't just give up; it's communicative too in other words. At Nordoff Robbins last year, people were saying, what seems like resistance is a form of communication; the idea is to find the communicative part of that. What is that child trying to tell you?

L: So that you have to truly listen.

D: To yourself, you know? What are *you* trying to tell *you*? Because there isn't a non-communicative thing in that sense. It's only when you come with a predefinition of what communication would constitute. What would constitute communication that you don't find it. That was something really valuable in Diane Austin's voice class I have to say. It gave a way to give voice so that you could objectify your feelings, and especially when you work alone for a while, and you find voices coming out of you that you didn't even know you had. You think, "oh what was that? I said that? I did that?" And then you begin to own that you know. Where does that come from? Maybe it's not something you want to feel or even that you're happy to feel, or proud of or whatever, but on the other hand it's there so you listen to it.

L: And in fact, you are bringing up another thing: not only are you listening to it, but you accept it also. So you can listen to it and accept it. So maybe that's what was going on with you too, you were open, you were listening, but also you were accepting. You didn't go back into your cognition and say, "but this is the same piece."

D: I totally heard it as a different part of the movement.

L: Exactly, so what I'm saying is that you accepted you were in that, you listened to it, but also every moment of the way you accepted that, you accepted being in that state and you didn't revert back to . . .

D: Wait I heard this already.

L: Right.

D: Fold your arms and . . .

L: Right, “I’ve heard this already, I’ll wait till she gets to the next part.” Alright, great. I’m going to move us forward. Then came the opening up again and you went into that big space. It was dark green and blue and very elegant. You were just being there, feeling welcomed. The feeling got stronger. You had this feeling . . .

D: That was like being very close to everyone who’s gone in that vast space. So close, almost could touch.

L: So people who had passed away you mean?

D: Yes.

L: So that’s very important for today actually. You said, “I should have come here, I should have come a long time ago. It’s been ready, this place has been ready. You’ve always been so welcome there.” Do you want to say something about that?

D: So that’s like my metaphor of a throne. And think about this piece that I’ve known since I was a little boy. And using it as the vehicle now to go to that place, it’s always been there in that way too. So very much it was about the selection of music too, that feeling.

L: Oh I hear that. So in a way it’s a reclaiming that piece or a reworking of that piece maybe?

D: Or rehearsing even, a rehearsing of it: “Oh you know this; you know every bit of this, where have you been? What took you so long?”

L: Was it the people there that were welcoming you?

D: Again, there were no words; but there was a sense of knowing this. No one said a word in my whole imagery. But certainties came to me in a way that I could express them in words the way I did. They came to me as obvious as if they had been said.

L: Then there were lights, specifically, you saw lights in the roof that were very coherent. I think things got more formed in the roof, like there were circles all around.

D: Oh yea, oh boy that was amazing.

L: Light blue, apricot

D: I remember all this really well.

L: A pervasive spring green, the colored light, and I think the spring green turned into a vaster space again. It was like. . .

D: And again, colored mists; so you can imagine colored mists coming and going and opening and closing and things like that. And then these really brilliant circles of light. So gosh I don’t know where that came from in the music except that I was ready to see that at that moment.

L: Ok, I'll accept that. Then it was like a high room. Then it was kind of like that throne, maybe a little bit like that throne that you were welcomed. I asked you what you heard in the music and you said, "I'm invited to walk up the stairs." So then it was stairs. "There are more steps and then there's a recessed place. It's full of light and colors and they are pulsing gently." And you were going up and in and there were people in the back supporting. I think we should go hear the music again, I want to stay with your impression of the music.

Music playing

D: I think it'll be interesting. Did you record us speaking too during the session? It would be interesting to see if my memory is accurate. But this ascent right here that's gradually happening, those are like the stairs, so we come with another one and we kind of pause right here. So it goes forward and then the cadence.

L: So very gently step-wise.

D: And the fiddle's color is so rich and so just blood red and so that definitely has to do with me and then suddenly it just drops. It's so full though at the same time. I mean, talk about a sparse texture, but it's so full.

L: I think here your images got even more distinct. There are people in back supporting, not human but friendly beings. You were getting closer to that apricot light. There was still more to go. You said, "it's so far away no matter how far I go there's still more to go." And the whole procession was coming very very gentle, very graceful. That kept going and then towards the end I said open to whatever the music suggests. And then you said, "it opened like a huge dish, and I'm in it."

D: That's right, and then the offering.

L: And then the offering and everything is dishes and it was whole it was a connection with the stream going in both directions I think probably around here. The threads were being spun right then, it wasn't like they were there it was like those threads among those dishes.

D: The connecting links. And I don't know how to describe the dish it was about this big and very round and flat like a huge contact lens.

L: And what about the music? Just what you're thinking now.

D: This spot right here is so loving, I don't know how to describe it. Because the winds are sustaining that chord and the violin is just telling all the notes and telling them each with their side notes. So that everybody's connected that thread of connection.

L: So the violin is making that connection?

D: Yes, the winds are holding the chords, and the violin is going through and connecting every last one of them with the scale steps in between and beautiful filigree on each; each one has an emotional tone to it; an emotional load that it bears.

L: Then, were you aware that the piece was coming to an end? No you weren't, never mind. So let's just keep going.

D: No I wasn't, because I had gone to quite a place and this piece? That's from an opera? I didn't know that piece.

L: It's *Regina Coeli* from *Cavalleria Rusticana*.

D: Ah, that's one of the pieces I don't know. I knew it was somewhere in that period, but I didn't know what. And I understood it because it's in Italian and Latin too, so I knew what the words were that were being sung.

L: Actually I don't know what it means.

D: It's one of those things. I'll tell you another time.

L: So this came to an end right?

D: Yes, see it just goes into the stratosphere.

L: And we'll see how you experience the shift to the next piece.

**Mascagni** *Cavalleria Rusticana, Regina Coeli*

D: Yea the organ sound, I didn't say this because I was confused, but it gave me architecture all of a sudden. Suddenly there was a church, which makes sense; organ music. Plus I've been an organist since I was sixteen. But once the singing started, I was able to see all the colors again and the room again sort of misted and faded away. And all that was left were these vibrant colors - very warm at first - reds and oranges and golds. And I didn't speak about this because I was sort of shocked a little bit.

L: I could see it on your face: the shift in the musical language, the instrumentation was so different. So I felt you adjusting.

D: Yes, I was adjusting at first. It's interesting because a lot of people have strong aversive reactions to different sounds. Some people just hate the organ, some people hate the violin, some people hate the operatic voice. I have no such problems; it's just an adjustment.

L: So you experience the organ first, then the voices, then the warmth.

D: And the human voice is so warm; there is literally flesh and blood there.

L: So you really felt the humanness of it.

D: Yes. Very much.

Music playing

L: Then it was gold and red. Then it became silver and cool; it was open on top and purple and it felt like support and there was a feeling of going up. It turned from stairs into a ramp. I think there was not so much imagery in this piece, but it just kept ascending. It became people instead of just beings but it was really people.

D: So humans, human voices.

L: Yes it turned into human.

D: Whereas Beethoven's music was like beings because there were no human voices. I mean there were humans playing it that's for sure and they were very convicted about doing it, but it was the beings themselves, kind of the notes and the shapes they were making. Where here it's literally people *and text* that I understand.

L: So just listen to it for a minute and see if any thoughts or impressions come to you.

D: This is where the ascent is. It started down low but it gradually keeps going up. And I think Mascagni put that in there. These are cooler chords so less reds; B minor.

L: Do you have perfect pitch?

D: No I don't, I have relative pitch. I heard the Beethoven. But I can easily be fooled because I go mostly by color.

L: So there's a short episode and then it goes back and then it keeps going again.

D: And then the soloist comes in too, right? She's got some serious problem because she's singing her heart out. This is a little bit of a metaphor for the traveler – me. Someone who has trouble who needs help.

L: So you identify with this.

D: Yes very much with the voice. My soul went into her soul. And the supporting voices right? It isn't difficult read my metaphor into it in terms of a musical situation either, by any means. In fact, at first I was thinking, what's the connection here in terms of programming? Just a little tiny part of my mind was going "what about that program?" But as it went on, first of all I said "oh screw that, this is just me. But then more and more - especially now as I'm thinking - [I realize] it's very much in the same vein (whether you knew that or not when you picked it, it sort of doesn't matter); the aspiring soloist, the supporting choir, the orchestra, the gradual ascent in the music; those are already there in the pictures that I've had.

L: And then you had a specific image. Things came to a point, there was an eye there, very strong. I had the music on rather loud because it was a very intense image.

D: It was like I had seen like we were all being drawn to this thing that was this huge eye.

### *Summarized section of interview*

We were all being drawn into this huge eye and it seemed like we were all going into the eye, but actually what happened was we all went through the eye and beyond it. The important thing musically about this is that the piece comes to its “business end,” but then it continues with all these sequences, going up and up. So actually you can hear musically how it goes through the end, and then beyond the end with all these sequences. One thing I was very aware of at the end was that it was such a huge “amen.” That made me really aware that the end was coming. All through the end all those sequences kept going up which brought this feeling of being in a vast space, and that I was as vast as that space.

### *Canteloube Songs of the Auvergne, Brezairola*

When the Canteloube first came on, he was very aware of a feeling of being gently nudged. The musical language felt quite similar to the previous piece. The change in music felt quite comfortable, especially the viola felt quite comfortable. It felt like kind of a “husky buddy” to him. The orchestral chords - and just basically the orchestra - felt very safe. The piece sounded so tender and sweet. It sounded like a lullaby, kind of like your best buddy, or the feeling of a soul mate. Also, the music was so simple, like a jewel, but a very simple jewel. In the middle section, he thought that the music might turn into something else, but very quickly he recognized that the structure was just the same - it had just modulated to a different key. That felt very good and the change was quite prepared for. So all in all, this first hearing was very delightful. There was a strong focus on listening to the voice, and the sound of the voice.

As the Canteloube was played the second time, there was a feeling of recognition. He knew that it was the same piece and it was being repeated. This time it was a pleasant feeling. This was quite different from the second time the Beethoven Violin Concerto, movement 2 was played, because here, he recognized that it was the same piece. The feeling was pleasant in the same way, as if you were talking to someone on the telephone, and you got interrupted for a few minutes, but then you came right back. It was that feeling of being on hold, and then coming back like “ahhh” it’s still all there. So that felt very good to him. He was very aware of the voice, especially the timbre of the voice. In the second hearing, he had an experience of the voice being like liquid silver. It came into his head like a tube opened at the top of his head. That silver, which seemed like silver moonlight, flowed into his head and came down to his chest into his heart area. The silver was very clearly the kind of reedy quality of the voice. During the second hearing, that silvery liquid just came in more and more. He became a circuit, so not only did it come in and go down into his chest area, but then it divided and split and went down his legs. It felt like the silver and the music was cleaning him. This was very pleasurable and it was as if the voice was comforting him, taking cobwebs out. He described it as scooping, and gathering, kind of cleaning cobwebs out, and that everything it touched just dissolved. The deep bass drone then brought him to his awareness of being more rooted and lying down. This helped him to “land.” It was clear that the session was coming to an end and he was aware of his body on the mat, and it was a gentle landing.

At the third playing of the Canteloube, he was in a different state, a much more conscious state. He heard the music very clearly and consciously with a heightened awareness. He was



relaxed. He was aware of the bass notes, and he felt them on the parts of the body that were connected to the mat. He felt that the melody was in the upper part of his body, caressing his face, his chest.

The silver liquid that went inside his head continued to clean out his heart. When I asked him to listen deeply and really notice what he was doing, he was able to really watch the process of cleaning and saw that the voice was cleaning by turning and scraping and gathering all these little bits inside him that needed to be dissolved. So wherever the silver, the music, touched, it just kind of instantly dissolved or healed. Throughout that third hearing, it was very pleasurable, he felt like it was a reward to hear it again, because really the session had been done after the second hearing. In other words, it helped him to land, and he really experienced a kind of

*Verbatim transcript*

D: [Between the Mascagni and the Canteloube], actually there was continuity in the music language which was different in the change from Beethoven to Mascagni.

L: And its simplicity. So I have a lot of that actually. And the second time around, you welcomed it because you knew it, you knew it was repeating. It was like you were on hold and then got back. And the third time it was very pleasurable, and more consciously heard - like a reward.

D: The image of the boat, those kinds of things in the previous things. Like coming to shore, also coming towards consciousness.

L: Its fine, I'm fine. I understand what you're saying so there is no issue. Now that we've come from beginning to end, I'm curious about your impressions, about what's coming to you about the music, and the perspective of the music in the sessions?

D: I'm just ever more convinced, as a composer but also as a therapist in training, actually in action, since I have a client, about the structural aspects of the music and how much they do communicate beyond words and within their own framework. It's so freely accessible and therefore subject to so many kinds of interpretations. You can put a whole host of different words to the same musical experience and that core musical experience has such evocative power. And if you're good with words, you can put it into words, but if not, or it's not a good moment, or it's not time for words and you won't, then that doesn't take the evocative power of music away. That's the core thing, so learning to listen to our own way of listening and to try and figure out what other people's ways of listening are, too. The music is never the same, which is such a good point of the Beethoven. The music is never the same in the sense that it's always there, because it always takes a listener. Even if you're playing, you are playing and listening at the same time (that is if someone told you you should do that). Somehow I think the magic is not so much in the artifact itself but in the taking up of it; the communication aspect of it. That's that the simultaneous receiving, and the loop that forms within the listener of the input of the music itself, as we hear it in the moment, since the music itself doesn't exist apart from us hearing it in the moment. And we're changed by it, and it's changed by us being changed. And there is this constant loop of this going on. So what a beautiful vehicle, what a flexible and true to life, because it's the lives of the listeners that are realized when music is being listened to.

And the congruity and incongruity of the music and the life is part of the whole listening experience. If it's really the right song, "wow that's the perfect song for this moment," and if it isn't yet there is music, it's that very incongruity sometimes has a communicative power. I guess what I'm saying is it communicates no matter what.

L: Could you imagine this session starting out the same but with different music?

D: I suppose, yeah but it would have gone a different way, I can only imagine. I don't think I was being primed to have these specific reactions to any old music. It was very much about the music that was used. I was thinking this summer, the Brahms piano concerto, maybe it was the first movement (singing horn solo) and just how that was the big forest, and of course that influence what I saw, but I don't think I would necessarily lie down and have the same vision to the same piece. I'm still chewing on that second time I heard the Beethoven as if it was *deeper* in the piece and not the beginning of the *same* piece [movement]. And it's a piece I know really well. It's not like I can say I didn't know it.

L: It is, by the way, part of my study to take a look at repeated hearings. I didn't say that to you because you don't know GIM so well to know that, usually in GIM we don't do that kind of repetition, and in this study that is one variable in the study to have at least one piece repeated at least once. So that's really interesting to me. That was very powerful to hear you talk about the repetition and how you experienced it. Everything that you're saying in every single part is really meaningful but that is one of the parameters of the study.

D: The way that the Canteloube ended up bringing me back too. And that repetition can serve that [bringing back], it's a smaller piece and easier to contain in your memory. But even so, each successive listening had a different quality to it, all in the same basic theme of coming back but grounding. But each successive time it was a different *kind* of coming back: a different place in the body, a different place in space, a different mode of commands, all those different things.

L: Is there anything today that really stands out in the interview. Is there anything else you would want to say that really stands out about music that feels really important about music and therapy or music in general?

D: You know I think we really have given me yards of stuff to work through. I think some really cool stuff came up on every front, personal but also thinking about music – what it is, *per se* as a mode of communication, expression.

L: Maybe one or two more specific questions, what was your sense of my interventions, what was I trying to do, or how did they affect you?

D: I like how you asked me a couple times to focus on the music again. When you're making visions, when the visions are coming - for me they really are visions - sometimes I can see how that activity can take on a life of its own. While it would be connected to the music, perhaps in a more tenuous way, than if you actually let the music drive the thing - and you can say that a million times before, but it really does that help that you say that in the session. It really is helpful. Tethering me in a way, you know, 'ground yourself in the music, find the music again,

find that sound, ride on that.’ That I thought was helpful. Once or twice when the music was really loud I was afraid that I couldn’t hear you or you couldn’t hear me. That slid across my mind and then was gone. It wasn’t an abiding concern. I figured we could shout if we had to.

L: Yeah and we did. I wanted the music to be really loud. And I wanted you to hear me so that I was with you. It was very intense and I wanted my voice to be really strong. And it didn’t matter exactly that you knew what I said, I just wanted to be heard.

D: There was one time that that’s exactly what it was. You were shouting and ‘I’m still there.’

L: Okay, do you feel satisfied?

D: Absolutely, way more than satisfied, amazed and lots of stuff to think about.

**Appendix R: Michelle interview transcript**  
**Verbatim**

***Beethoven Piano Concerto #5, movement 2***

L: How does it sound to you?

M: Familiar.

L: Any other impressions?

M: Now it's sort of uplifting.

L: Let's go on a little more and any impression you have as you listen to it now.

Music Playing

M: I feel sort of an ownership of it now.

L: Oh, neat!

M: That's my song!

L: So enjoy that.

M: That's me at the pool.

L: What do you mean?

M: I just inserted my face into the ballerina that I had on stage.

L: So now you can feel yourself as the ballerina. How is it?

M: It's pretty good. I look great up there. I've got my old body back.

L: So keep listening. You're imagining yourself. You are the ballerina.

M: Sort of poignant. That's my song. It really is beautiful. I don't remember this part. Isn't that funny that I didn't remember that part? And this too, the deciding part.

L: Can you say how you hear the deciding part now? How did you hear that in the music?

M: It just seemed incongruous with the rest of it. Hesitant? I'm not sure.

Music Playing (End of piece)

M: They're getting to know each other. His part fades out and her part takes over. They come back together. Parts still over there saying, "I'm not really sure."

L: What happened at the end after that?

M: At the end they went off together as if everything was hunky-dory, but she knew she wasn't quite sure.

L: So you heard in the music a "hunky-dory" part, but also still that unsure part? At the same time?

M: Yes.

Music Playing

L: It's Beethoven's *Fifth Piano Concerto*. This is just the second movement of it. I played it for you three times over. Were you aware that the same piece was playing?

M: Yes.

L: Did you know that it was three times?

M: I knew it was two or three. I wasn't certain that it was three.

L: After the first time, do you kind of remember what it was like to hear it again? Now you're enjoying . . .

M: I remember thinking hmm, is this the only thing I'm going to hear or will there be other things?

Music Playing

L: So actually, the first time you heard this part, at first, you felt that it was ballet, you didn't know if it was a man or a woman, and then you said I think it's a woman. And then you felt like something was being freed.

M: That was the first time.

L: When you think about that now and hearing the music again, can you say anything more about that.

M: Where that came from? The music was going up. I guess not yet having heard the piano or the tinkling part, which I later associated with the female part, I wasn't sure because it could go any way. It was in comparison to that, that made it more masculine.

L: So when the female part came in, that made you back track.

M: It made me go OHHH.

Music Playing

L: So I think then after the piano woman came in . . . that must have been around when you said that's the woman.

Music Playing

L: This (referring to the music) was running, a part of running. You said it sounds like someone is running.

M: They're always running around stage.

L: Can you say anything about where that came from now listening to this?

M: The tempo maybe and the rhythm of it.

L: And then coming to here (referring to music) is when you started to say "I'm watching and trying to figure out the story." I said "ok so let yourself watch it and just figure out." Then you mentioned that there's a formality and said, "I'm trying to pick the best dancer." So, is that like you're scouting out and watching?

M: Yes, trying to figure out who's my favorite.

L: That's when you told me that you were in the Wang Center and the formality was in the Wang Center. Everyone was dressed up. This feeling was that it was beautiful, too. So as you're hearing this part of the music again can you say anything about the formality and being in the Wang Center or how you experienced the music?

M: For me, classical music is formal and traditional. I feel like I should be dressed up when I listen to classical music.

Music Playing (first repetition of Beethoven)

L: It was the beginning of the second time when you said someone's looking for something from another person.

M: Oh yea, and then the story came out. . . It really sounds like searching to me.

L: I don't think you ever used the word searching until the music was done. Then you said, "This is the female part." Can you say something about how that sounds to you as the female part?

M: It just sounds traditionally female; the higher notes, the lighter area. Just more stereotypically female in a ballet.

L: Then they were outside, so then you started describing the scenery.

M: Yes, the set.

L: Did that have something to do with the music?

M: I don't know, must have. I think the trills sounded like water. So he must be outside, she must go outside and he's in the forest of course.

L: Then came the chorus. I wonder if that was in the part where we just listened to that you said you didn't remember.

M: Oh yes, could have been. There's always a chorus hanging around somewhere.

L: They have to employ more than just the male and the female. This (referring to music) is the part where we just were that you said you didn't remember well. Next, you weren't quite sure if they were both looking for each other. I think you kind of tried that on in the forest. You said, "I can't tell from the music if they found each other," and I helped you to be patient and to see what happened with the music. And that's what you did, you kind of just waited till it became apparent in the music and then you said, "They are together," and when the music came to an end they were going off stage (when it came to an end the second time).

Music Playing

L: Is there anything you remember about the music after that second time when they were going off stage?

M: Just not fully decided. Sort of like a cliffhanger.

Music Playing

M: I think if it had crescendoed, then you would have said, "Ah, they fell happily in love and they'll be together forever," but it just sort of drifted off and got quieter. It wasn't a real clear ending; it just sort of drifted off... That made it seem like it wasn't resolved (to be together or to not be together). They do run off together, but it wasn't really a "happily ever after" thing. Nor did they say, "No thanks, we'll go our own separate ways."

Music Playing (second repetition of Beethoven)

L: When it started the third time, you said right away, "Oh this is the man. He's wearing brown tights," and at this time you were really clear: "He's looking for her and he's worried." So what can you say about this?

M: It's not the big booming manly, jumping, spinning music that you sometimes get (in ballet). It was just sort of heavy – and that was the worry. There wasn't a manly: "I'm going to find her and I'm going to get her - march, march, march," It was more like "she's out there somewhere I'm not sure where."

Music Playing

L: Again you had the same experience when the piano came in, this is her part. Then you characterized it as reflective.

M: Well, I got the water first from the tinkling, but it is reflective in the sense of being out there alone; happy being alone, and doing her own thing; not looking for anyone but just sort of being with herself.

L: And that's how you experienced that piano up there?

M: Yes.

Music Playing

L: During this time he came upon her. How do you hear that in the music now?

M: I could hear those two parts coming together.

L: Then as it continued you said, "They're getting to know each other."

M: Sometimes it's just her, sometimes it's just him, sometimes it's together; it's the dance when you're getting to know someone.

L: You felt some hesitation on her part and you felt that he was pursuing her. Then the heart of that story really became clear: "He's pursuing her and she's hesitant and deciding."

M: I love that.

L: It's your story.

M: I love my story.

M: They're not totally in synch - the two parts of the music. They're not totally in synch.

L: Aha. Wow how do you hear that? Listen again and see if you can hear how they are not in synch.

M: His part is very measured, very steady, very rhythmic; her's is not.

L: Anything else to say?



M: I love this process, I'm so proud of myself! Which is kind of amazing; I thought I was just watching a ballet. Now I'm writing an autobiography.

L: So you have feeling of ownership is that it?

M: Yes.

L: And you're enjoying it?

M: Yes, very much. I didn't think I was going to frankly, but I am.

L: Anything about relating to the music? How does it feel to you now, your relation to the piece?

M: That's *my* piece. It was written for me. Honestly, I don't think I would have sat down and listened to this piece and gotten all of that had I not gone through this process; a lot of subconscious stuff in music.

***Schumann*** *Fünf Stücke im Volkston, Langsam*

M: I think this one is, maybe, even more beautiful because it's different for me. It was unexpected.

L: So when it came along it was unexpected; unexpected in that it didn't fit my preconceived notion of what classical music is (because it was just cello and piano).

L: You're not used to that at all because of the kind of music you listen to and dance to. It's quite different; most music has many more instruments. So you experienced the cello, you felt it as really different. So what happened inside you when it was so unexpected? Do you remember what you did?

M: I vacated the Wang Center right away and then I didn't know where to go or where to be.

L: So, did your image disappear or did you decide?

M: I don't know I don't remember. I just know that I wasn't there anymore.

L: The first thing you said was that it's wistful. So if you think about that now, how did you experience that wistfulness?

M: I think it's beautiful.

**Music Playing**

L: Then you started to notice the musician, and you were focusing on the musician.

M: Yes, I got my visual.

L: Did you get it with the cello?

M: Yea, I got big and wood.

L: You were watching his body. Then you started focusing on the movements. Can you say how you experienced it in the music?

M: I got all wood. I got a whole room full of wood. I have no idea.

L: Do you have any idea in listening to the music; something made you focus on his body and his movement.

M: I don't know, it just felt wistful, and that made me picture how he would be moving if he was really feeling wistful.

Music Playing

L: Then you sort of wondered how it would be to play like that. Then I asked if you could imagine that. I think I was trying to see if you could feel like you were playing, but you couldn't. You were thinking about who wrote it and why; you started thinking about the music. So just listen for a minute and see if anything more comes to you to say about this.

M: It's really beautiful. I think I liked it better without the piano . . . It sounds sad, sounds wistful. Yea and I'm going to the same place I was.

Music ends

L: What thoughts do you have?

M: Just I'd really like to meet the guy who wrote that. I bet he's smart. . . I'd like to know what he was thinking about when he wrote that song. . . What's the story? I didn't get a story for my own so I guess I need to know the story. I guess all music has a story.

L: Good question.

M: I don't know maybe it does, I'm not sure. I'm looking for a story in this one.

L: Right, because you had one in the last piece. Tell me, now having gone through this listening, is there anything that you understand about your experience today that you got from this interview?

M: Affirmation maybe because when you were pointing out what I said at each point of the song I could say “yea, I can see that; yea that makes sense, yea that was right,” or I had the same answer.

L: In this interview, you could still relate to what had happened in the session; and it was still true for you.

M: I think that your questions made me more conscious of why certain parts of the music made me picture this or with the measured meter, for example. I hadn’t gotten that before (in the session); it just happened.

L: You weren’t supposed to. You weren’t supposed to be thinking about it at all. This is what the interview is about and trying to think about that. Do you have any insight about how you understand your music experience from this last bit of listening? Does it help you to understand it?

L: How was the music therapeutic in the session?

M: It was therapy because you were there. If I just took a piece of music and went off by myself it wouldn’t be therapeutic.

L: Right, but I was just helping you to have that experience with the music. That’s true that it had to do with me, but what did I help *you* do with the music?

M: You engineered the environment and you chose the music and you asked a lot of questions. I think without that it wouldn’t have been the same experience.

L: So what was therapeutic about this music listening?

M: I think it was afterward (discussion); making the connection with my life. Although I wasn’t convinced of that.

L: It became therapeutic for you when you understood. You hadn’t quite owned it. The interview helped you own it more. The interview was therapeutic for you too... How much of that session were you focused directly on the music? If you would say it in a percentage.

M: Only on the music?

L: Only on listening to the music, if at all.

M: A very short time in the beginning because then I got my visual and I was off to the races. Then I was doing both: getting a visual and listening.

L: So only right at the beginning?

M: Right, when I didn’t have the visual yet, but I’m a visual person.

L: Can you make a summary statement?

M: I rock!

L: Does it give you a new perspective about music therapy?

M: Yes it does.

L: Can you make a summary statement about that?

M: The obvious difference and the obvious new perspective for me is that I've only ever experienced or known about music therapy in relation to children with cognitive difficulties, so that's the obvious. But, from a non-feeling person (I'm exaggerating); from a person who has never been to therapy and doesn't sit around talking about my problems a lot.

L: You're a more cognitive person.

M: Yes, I'm more thinking as opposed to feeling person. I thought the benefit of doing this was for you and now I'm seeing it's for both of us.

L: Can you say how it benefitted you?

M: I have a new realization and awareness that I will go forward with.

L: The music brought you that new awareness.

M: If you want to say the music brought it to me, *you* say the music brought it to me.

L: So the new perspective is about music therapy with normal adults in therapy is that the music could bring you a new awareness about yourself. And you think you can use the new awareness for yourself.

M: Yes. There's your summary statement.

L: That was like having to eat your vegetables!

## Appendix S: Bill interview transcript Verbatim

### *Respighi Pines of Rome, Gianicolo*

L: In this music it started with the night and the owl and then turned into the morning; it's daybreak, sunny, forest, and birds are flying around. It went from night to day and lots of things were happening. I wonder if you can say anything about the music specifically, not so much about your images but just as you listen to that what do you notice?

B: Just the feeling of building, waking up, stretching maybe.

L: Then as it goes on there's a feeling a little bit later of something in the distance, something maybe got darker and dangerous. So just listen and think if anything comes to you to say.

B: I really feel the same way. I can't really be much more specific than that. Some of the tones seem to kind of collide with each other and create dissonance with each other.

L: What you're saying is fantastic. You're part musician part not and just the way you're describing it is really helpful.

L: At the end of this piece there were some patterns of light at the end and the Wizard of Oz and then the meadow came back.

B: The notes right there, I like the patterns.

L: Yes, that was the light. Then the meadow came back but more as a meadow, not so much as a forest. So let's just listen to that part.

B: Yes, and the birds. To me, there's more of an openness to this part so there's no trees obstructing the horizon; the light is minimalistic.

### *Strauss Death and Transfiguration, Transfiguration*

L: Right away there is this big cruise ship. It had lots of windows and people and it was exciting. So just listen and see if you have anything to say. What comes to you as you listen to it now?

B: Very similar to the previous one where there's a slow build up. Something is beginning, you start slow then build up, then crescendo, then end it. A lot of traditional music works that way and it's something that maybe doesn't excite me all that much. I don't know.

L: Can I ask you about it? Can you say why? Is it because of that slow steady...

B: It bores me, it's like, I've heard this before.

L: Alright; what do you mean that you've heard it before?

B: I feel like I've heard music composed this way thousands of times.

L: Then the image of the cruise ship went away. The ocean was there, shiny; it was sunny, a little purple, and then as it went on then you were a little focused on how dramatic it was - it was a little too dramatic, it became cheesy. Dramatic and cheesy aren't exactly the same, but I think it was both. It was dramatic and it turned cheesy and then that's when the romance came on the ship. So the ship came back. Let's just hear the dramatic part and see how you hear it now... So what would you say about it now?

B: Still dramatic, I don't think I have anything to add to that.

L: At the end, then it was so dramatic it was overwhelming. What was overwhelming?

B: I don't know what came first. I don't know if the shaking started happening and then I started feeling overwhelmed by the music or if the music triggered that. It's hard to say.

L: You said out loud once, "it's hard to keep my eyes closed".

B: Yes, because when my eyes were closed I felt like I was moving.

L: Yes, I wasn't sure if the music got overwhelming and stimulated that or whether you felt that and then you thought the music was overwhelming. Can you say what was overwhelming about it?

B: I don't know, I don't seem to find the music overwhelming, I do find it dramatic. What I mean by that is maybe really jubilant or maybe . . . and I know listening to it now I'm not nervous and things aren't shaking.

L: If you think back to when you were hearing it before is there anything you can remember about that shaking that pertains to the music?

B: I might have had this image that is still in my head even though my eyes were closed and I definitely remember this pinkish, this pink right here that I picture.

L: Any other thoughts or ideas you have about that experience? I think it came back a little bit but that's the first time it came up, so any little thoughts you have about the music, about classical music in general, and the way you were talking?

B: I think I'm picky. I think it had better be something I enjoy and then I could get involved in it. I could enjoy some of it. I was definitely not meditating but I definitely wasn't as conscious as I am now when I was doing that whole thing. Maybe at that level, the music has to be something I'm really comfortable with. That doesn't necessarily mean soothing music.

L: Actually I could respond to you about that. I had a whole plan on my playlist for you and every time I changed the music I thought that it would have been really different for you if you had a piece that you were familiar with.

B: I mean I've gone there with other music and I just sit there and I've just listened to it or painted and listened to it and I've definitely journeyed through it.

L: That's, in part, why I chose music for you that was different and unfamiliar, but if I had played you a more familiar piece, when you started shaking you might have been able to go with it a little bit more. But I understand exactly what you're saying, this is music that you weren't so invested in because it was overdramatized. On some level I understand what you're saying when a piece doesn't really ring true to you, you're not going to let go to that piece of music.

B: Yes, it's almost like I get nauseous, but still appreciating the musicians and thinking about it.

L: I understand, and right now I want you to be completely honest and it's fine that you didn't like it. Your true reaction is helpful; what I'm looking for. So that's great. So let's go to the next, is there anything else you want to say about that?

***Brahms Symphony #3, movement 3***

L: So this brought right away a dance; old time black and white. You said "this is not intriguing, it's just black and white, there's a guy in a tuxedo dancing on the cruise ship with the woman, classical movements." How does it sound as you're listening now?

B: Old fashioned.

L: As you think back to when you were in the session, do you think of anything about the music itself? Something else that you might have been listening to or noticing?

B: Well I definitely noticed when it started, it seemed kind of like a waltz. I don't even know if that's the right term.

L: Yes, it is.

B: Swinging type. And that set the tone for the whole rest of it. Even though it did deviate from that, I was still kind of stuck at the beginning.

L: It did change, then the moods came but it kept on going back to the couple dancing. Next, the music was just kind of neutral, it was nothing, it wasn't happy it was just kind of no feeling, not happy or sad, not angry. Then you were hearing the orchestra and you had the feeling that you were supposed to be listening and the audience was supposed to be listening. It wasn't inner motivated. Can you say anything about the music in that regard? What was so un-motivating?

B: It wasn't very dynamic. It was boring for me. In that way it almost grabs my attention but it doesn't.

L: So is it when you hear the music kind of goes up; it swells up but. .

B: And then it almost goes up, but it brings back this one melody. I just wish it would do something a little more interesting there.

L: I understand, if it's going to call your attention to it then it should do something more interesting. I played that piece a second time because I wanted to see what would happen.

B: To see if I would have a completely different reaction to it?

L: It was a psychological challenge: could you find something in that music? Or at least could you describe it a little bit more? Let's go through this and I'll explain that to you afterwards. The second time around you realized that all my recordings are crackling records because the recordings are done by a guy who believes in the sound of LP's and he recorded the LP's and made them digital. So these are old crackling records made into MP3's. So you heard that. Then you were talking about it being boring. "I'm not getting much, it's the same tones and same melodies that try to grab my attention" and we did all this, "it's like a little wave." Then at the end you had a specific image of looking at a book with photos from an exhibit and talking with the artist and then the elephant was there and the dome and things that go with that. So, any ideas about the music?

B: You know, I think that came up because I was really just trying to find something to grab onto and that came into my head. I kind of grabbed on to it, and I was all of a sudden just remembering it. It was something I was doing on the computer, not a book. It brought up that memory for me. I think it brought that memory for me because of the elephant thing in the beginning - maybe because it was something in the sound that was similar to the elephant imagery in the beginning so then I was looking at an elephant last night, so it was ok.

### *Debussy Danses Sacred and Profane*

L: So at the beginning you said this is more interesting, the elephant got animated, I think when the harp came in. So can you say anything about that just now?

B: Yea, it was more interesting than the other music, there seemed to be more layers. Maybe just one more layer: the harp and the plucking, not totally on time. And the elephant, yes, I could feel the rhythm, the same qualities in the rhythm. And then the mouse joined the party and the mouse seemed to be the harp.

L: The harp was the mouse. Ok, great. Then came the stack of hay, actually that was like an entering image I think, and then that's when you got dizzy.

B: Oh really? I don't remember it like that at all.

L: Really? The first thing that you said after you saw the hay was that you got dizzy and then I think you opened your eyes. You got dizzy and then you said "I snapped out of it." Then you



closed your eyes again and then came those red outlines on the edges with kind of nothing in the middle and I think it turned into that shaking and the pulsing. Would you describe it more now as pulsing?

B: I don't know. I felt like it was going like this.

L: So if you just listen to the music now and see if you can say anything.

B: You know the notes are trying to chase each other almost.

L: Do you relate that to what you experienced before?

B: The hay? It's tough for me to describe it, but there was a haystack and then I was kind of moving through it - maybe like trying to look for something. It goes along with that melody. So maybe a needle in a hay stack, certainly that but, it was a pile, not a stack.

L: And this music was more active to you so you were searching, you were kind of looking and moving more.

B: Yes.

L: Do you think something in the music relates to that shaking sensation?

B: I don't know. Something in there makes me feel anxious or nervous or unsettled or dizzy.

L: Then in this whole part there were images and then a wagon, a western style wagon and one wheel was rolling down the hill.

B: I remember that.

L: And then another image of a T.V. antenna and I think that's where it started to spin.

B: Yes, the wagon wheel wasn't on the wagon it was on top of the hill; like some crazy scifi western; like an antenna, the signal was spinning around.

L: So then you were just aware of the repetition and spinning and then you started spinning too. Then the spinning theme came and evolved.

B: I was trying to go with it, so it almost complemented it, like a dance. The wheel was spinning at a certain rate doing something like this and then I was doing something complementary, the emotion was complementary. It was more like rotating.

L: So there was the pulsing, and then also the spinning of the pulsing. Oh neat!

B: Yes.

L: Because pulsing is like spinning in a way, it's like a half spin. Then the music was rotating and you were rotating. Then the music was rotating and you were rotating but not together, and then that became more disorienting. Is that accurate?

B: I think so.

L: I think you were fine when you went with the spinning while it was that dancing part (earlier in the session).

B: Yes, but it was never comfortable.

L: Ok, it was always uncomfortable.

B: I was physically feeling it. Observing other things too, that was my problem.

L: Anything you want to say in general about that piece?

B: No there's nothing. Nothing memorable about it. I think the melody was kind of catchy.

L: If you compare it to the other pieces, you described it as more interesting, it had another layer, the harp layer. You want to undo that?

B: I don't know, you see, because we are chopping them up (referring to the listening of short excerpts of music). Some of them seem to become interchangeable. We hear them for fifteen seconds here and there.

L: So let's go on to the last piece.

### ***Faure Pavanne***

L: You said "It's like the beginning of the journey, I hear footsteps strolling by the river, scenery, rich."

B: Yes, the scene was becoming richer; filling in.

L: What comes to your mind as you were listening?

B: More like what was I thinking, what I was trying to recall when I was listening to it before?

L: Yes.

B: That's what I was thinking. I wasn't really having much of a response to it.

L: So what were you thinking? What came to your mind?

B: I was walking on the side of the river.

L: I'm going to play the contrasting part a little bit where the surprise came.

L: This is the bridge, something sad happens.

B: Yes, definitely the interruption, the crescendo or whatever you call it.

L: Now that we've chopped up the music and listened to it back and forth, can you tell me what you're thinking about? What thoughts come to you as you're listening, just anything that you think about?

B: The way the music seems to be composed and played, it's not very dynamic. You can almost kind of guess where the music is going. This melody, the bass line, the cello is going to be doing that soon and the cello will change and the bass will change.

L: It's too predictable?

B: Yes, predictable. For the most part, yes. I know I wasn't going to hear a trumpet solo or something; so yes, predictable.

L: Can you describe how that affected you?

B: Maybe it didn't inspire anything special from me. It didn't draw me in in such a way that called some unusual imagery from me or something.

L: What did you need from the music,? Off the top of your head, what would have drawn you in?

B: It's hard to say. A faster tempo or different instrumentation.

L: Actually at the end you said, "what about ACDC?" Perhaps you really were craving to hear ACDC after that predictability?

B: I think when I say ACDC it kind of says something faster - more upbeat, more energetic. Not necessarily something with lyrics, that would probably change this whole study around.

L: So could I just play something? This is something non classical.

***Brent Lewis Caribbean Sea (drumming) playing***

L: What about this?

B: It's much more exciting. The dynamic range of it seemed to be; well, it sounded like the drums were coming from over there in the room.

L: From a wider space.

B: Yes.

L: It's less contained and predictable and wider and open. Does that make sense to you?

B: It actually doesn't make sense because I would not have thought that just hearing a beat with drums would be wider, but maybe it was just the dynamic range, the frequency range was bigger which made it more dynamic in the room. Some of the classical music could be expansive, the sound of it; just abstract tones.

L: Maybe this feels more direct to you?

B: I can physically relate to that more. I can play that, I can feel it. Tribal.

L: In a way it's hard to explain why the drumming really hits you but I can completely understand when you say that some music you can relate to, and other music you can't. It's way too complex to discuss why, but I wanted to play you a piece that you could relate to because of your musical needs. So hearing this drumming piece, does that help you to articulate what was missing from the pieces that I played for you a little bit more?

B: Maybe it was the lack of relating to that one musician playing (as opposed to the whole orchestra). The music was really refined and there didn't seem to be much improvisation happening. With the drumming piece, I could have very well been, "just go with it."

L: So it could be more spontaneous.

B: Yes, the music (drumming piece) speaks to me. A voice there speaks to me, whereas with the classical music there wasn't a voice – it was here and there; events, and those events turned into characters - events happening around us, curious times.

L: So it's much harder for you to find the voice in the classical music.

B: In this particular classical piece I definitely would say that.

L: And right now, let's not generalize - let's say this experience was hard for you to find the voice and it sounded too predictable and that was hard for you to relate to. So what you needed more was something that felt more spontaneous and that was a little more human?

B: Yes, more human, everything in it to be more human; more deviations here and there.

L: That has to do with spontaneity.

B: I think so.

L: And how you are able to relate to it. The feeling of relating to it more directly.

B: And then I think what's also important is frequency range and sound quality. You know definitely having that little hiss from the record player does something. That does something for sure; then comparing that to the drums, it's totally different.

L: Like the drums were more present?

B: Yes, present.

L: And the recording (the hiss from the LP) makes it kind of distancing.

B: Yes, very much so.

L: Now let's focus back on the therapy session. Despite the fact that the music was too predictable, and not quite what you needed, therapy is not always about getting what you need or what you like, it is about helping you to be aware of yourself. So, if you go back to the therapy session, can you say you got an awareness of yourself from that too predictable music and the images that came to you?

B: I'm not sure. I don't know.

L: Could you say, from your session, what do you think music therapy is?

B: I guess it helps get out certain stories or feelings that I don't tap into any other way.

L: And how does it do that if I might ask? Just whatever comes to your mind, how does it do that?

B: By making me feel comfortable or uncomfortable or feeling like I can relate to something that's happening, whereas it wouldn't come up if I was just talking. It's kind of a narrative in a sense it starts here and you just drop me here, and it connects in one spot that I never would have got to.

L: How do you think it did that?

B: I really have no idea.

L: I don't know the answer to that either, but if you could just say what you think from what you just went through, what would you say?

B: Maybe there are these invisible and soundless rhythms happening in me at all times. And maybe the music just streams right in and maybe picks up a couple things and just streams it out like energy or something.

L: And there's something going on in you, like streams?

B: Yes, there's always these melodies that I'm uncomfortable with and there's these beautiful melodies these rockin' songs that are always kind of going through me and then being asked to focus on the music - I don't think I've done anything like that before, maybe close to it, but nothing like that, and asked to stay verbal. It's like having one foot planted in consciousness. The verbal part kind of builds the bridge, lets some of it out and expresses it.

L: Do you mean you had your feet in both places, one was inside, listening to the music and then when you were kind of forced to verbalize how you related to the music, what did my questions do?

B: "How does the music sound to you?" that's a tough question you know. "How do you hear it?" With my ears, I hear it with my ears. It makes me feel a certain way because of the melodies that were there and the timing and the sound quality. Maybe there's a lot of symbolism happening. When I hear the old record sound, maybe that brings me to a place, and then that melody brings me to the same place but a different story happening. Maybe things are just waiting to be tapped into.

B: There was a time lapse from the time I said what I was listening to and what you were writing down. If you were writing it down it had already happened. Or might have even changed a little bit.

L: You said it's symbolism. So that what the music did was to help you verbalize through my questions. So that helped you?

B: It's tough to figure out the symbols as we're going through it.

L: So when you're in the music is not the time to figure out the symbolism.

B: And I think I was trying to.

L: I think that always happens especially the first time because you can't turn off your analytical, cognitive self. You're always questioning what is this and why this? As you do this more it just fades, it doesn't ever go away it just fades a little more into the background. How was it for you when I repeated that one piece? Were you aware that I repeated that piece? I repeated the piece with the obnoxious melody that was boring to you.

B: I thought you asked me if I wanted to hear a piece again, but I said no.

L: Right, that was at a later time with a different piece - I asked if you wanted me to repeat a piece or to play a different selection. You said no to the repeat, and I didn't repeat it. The first time, I didn't ask you if you wanted it again, I just played it again.

B: Well if you played it again, I don't remember having a reaction to the fact that you were playing it again and I also don't remember having a bad reaction listening to it. Any more or less than the first time.

L: At the time that I played it, were you aware that it was being played again?

B: I don't think so, right now I don't think so.

L: If you were to say how much attention you paid to the music, could you say it in a percent, from 1 to 100%?

B: Yes, like 80%.

L: You mean from beginning to end?

B: Yes.

L: And you said you hadn't ever really listened to music in this particular way. Can you say what was different?

B: Oh, I mean lying on the floor, still. Usually I would be moving.

L: You move, dance?

B: In the car, I'm active. Also, being asked to listen to the music, and being asked questions about it as it's going on there's a big difference. Having you sitting next to me on the floor that's a difference, too.

L: How do you have a sense of how my presence might have affected your responses?

B: I think it was better to have you right there rather than sitting over there in a chair? Also, sometimes I couldn't hear you.

L: Yes, I wasn't loud enough. Could I ask you - what does this say to you about your relationship to music?

B: My relationship with music so often now happens with my art. A lot of times I'm listening to it and I'm kind of dancing with my hand or the paint which is kind of spontaneous to a certain extent. So I might think about listening, closing my eyes and visualizing. Then maybe coming up with something and then taking that to a canvas or something. It could bring things out of me if I'm in a different mode.

L: So when you think about your relationship with music now, this kind of opened you to thinking about different states inside and not to just be satisfied using it with one way.

B: I like listening to music in the car. My wife and I like to listen and sing and be goofy, and sometimes dance around; and there could be something closer to this that's kind of practical as an artist. If I wasn't always trying to tap into my creativity I might not do that. That's what intrigued me about doing this in the first place. This might take me to another level of something - so that's what I was thinking.

L: Do you feel satisfied with your answers and is there anything else you'd like to say?

B: Yes, I guess I always wish I could communicate what I'm trying to say better in words. As a visual artist it just seemed easier to draw you seven pictures instead of writing it.

L: Thank you for that, that was a great idea.

B: It makes it a lot easier.

L: Do you feel like in what you've told me that I understand what you're trying to convey?

B: Yes.

L: Yea, I think I did. It's very exciting to me, everything you said was very exciting.

B: Why was it exciting for you?

L: Because everyone is put together so differently inside and your relationship with music is so unique to you. So, it's completely fascinating to me how all that comes out in the images - that's fascinating on one level but the next level is how you understand it when we talk about it and how you come to see it through your perspective. The whole purpose of this study is to get your perspective about how you experienced it. So you gave me both of those levels in the session you really put yourself into the session and then for me it's so exciting to hear your perspective and I'm not thinking about what mine is, I'm completely happy with yours. I could write all my hundred pages on that, but then what I have to do is take your unique perspective and all the other five perspectives and try to put that together with mine. The way you're thinking and the way you responded is just really cool. I think it helped me to put on that other piece of music to help articulate because in some ways I didn't spend so much time getting your musical identity and so that session worked but still I was intrigued about your musical identity and I wanted to understand it more and I think that was helpful for you too just to get a more complete picture. So all of that was exciting and I didn't know exactly what I was doing in the interview I kept asking you questions and when you weren't able to answer my questions that was perfectly fine. There's no real protocol for what to really ask and I was asking the same questions to see if you could look from a little different perspective. I just wanted all you could give me.

B: I think if maybe (in the session) if you had asked me something like do you notice the harp, you know, does that invoke any color, that would have helped.

L: Yes, but I couldn't do that because that would have been me picking out for you what to notice. I know it was uncomfortable for you that it was so broad.